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| District of New Jersey, Trenton Division | |
|--|----------|
| | |
| | Case No. |

Joint Debtor, if any

| IN RE: | | Case No |
|------------------------------------|---|---|
| Crocitto,, Frank A. Jr. & Crocitto | , Chrissy | Chapter 7 |
| | Debtor(s) | |
| | VERIFICATION OF CREDITOR M | ATRIX |
| The above named debtor(s) here | by verify(ies) that the attached matrix listing cre | editors is true to the best of my(our) knowledge. |
| | | |
| | | |
| Date: January 9, 2019 | Signature: /s/ Frank A. Crocitto,, Jr. | |
| • | Frank A. Crocitto,, Jr. | Debtor |
| | | |
| Date: January 9, 2019 | Signature: /s/ Chrissy Crocitto | |
| <u> </u> | Chrissy Crocitto | Joint Debtor, if any |

Best Buy/Cbna PO Box 6497 Sioux Falls, SD 57117-6497

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Capital One PO Box 30253 Salt Lake City, UT 84130-0253

Chase Card PO Box 15298 Wilmington, DE 19850-5298

Chase Card Services Correspondence Dept PO Box 15298 Wilmington, DE 19850-5298

Chrysler Capita Santander Consumer USA PO Box 961275 Fort Worth, TX 76161-0275

Chrysler Capital PO Box 961275 Fort Worth, TX 76161-0275 Citi PO Box 6190 Sioux Falls, SD 57117-6190

Citi/CBNA Citicorp Cr Srvs/Centralized Bankruptcy PO Box 790040S Louis, MO 63113

Citi/Sears Citibank/Centralized Bankruptcy PO Box 790034 Saint Louis, MO 63179-0034

Citibank Centralized Bankruptcy PO Box 790034 Saint Louis, MO 63179-0034

Citibank N A PO Box 769006 San Antonio, TX 78245-9006

Citibank NA PO Box 6181 Sioux Falls, SD 57117-6181 Citibank/Best Buy Attn: Bankruptcy PO Box 790441 Saint Louis, MO 63179-0441

Citibank/the Home Depot Attn: Recovery/Centralized Bankruptcy PO Box 790034 Saint Louis, MO 63179-0034

Citicards Cbna Citi Bank PO Box 6077 Sioux Falls, SD 57117-6077

Citicards Cbna PO Box 6217 Sioux Falls, SD 57117-6217

Comenity Bank/Pottery Barn Attn: Bankruptcy Dept PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Pttrybrn PO Box 182789 Columbus, OH 43218-2789 Comenity Bank/Victoria Secret Attn: Bankruptcy Dept PO Box 182125 Columbus, OH 43218

Comenity Capital/Mprc Attn: Bankruptcy Dept PO Box 182125 Columbus, OH 43218-2125

Comenitybank/victoria PO Box 182789 Columbus, OH 43218-2789

Comenitycb/myplacerwds PO Box 182120 Columbus, OH 43218-2120

Costco Go Anywhere Citicard Citicorp Credit Services/Centralized Ban PO Box 790040 Saint Louis, MO 63101

Dsnb Macys PO Box 8218 Mason, OH 45040-8218 Gateway Mortgage Grp ATTN: Bankruptcy Dept. 244 S Gateway Pl Jenks, OK 74037-3448

Gateway Mortgage Grp 244 S Gateway Pl Jenks, OK 74037-3448

Jewelers Reserve Card PO Box 9001006 Louisville, KY 40290-1006

Jewelers Reserve/Cbna PO Box 6497 Sioux Falls, SD 57117-6497

Nelnet Attn: Claims PO Box 82505 Lincoln, NE 68501-2505

Nelnet Lns 3015 S Parker Rd Aurora, CO 80014-2904

Nordstrom FSB ATTN: Bankruptcy PO Box 6555 Englewood, CO 80155-6555 Nordstrom/Td Bank USA 13531 E Caley Ave Englewood, CO 80111-6504

Performance Finance 10509 Professional Cir Reno, NV 89521-5864

Santander Consumer USA Attn: Bankruptcy PO Box 961245 Fort Worth, TX 76161-0244

Sears/Cbna PO Box 6217 Sioux Falls, SD 57117-6217

Syncb/amazon PO Box 965015 Orlando, FL 32896-5015

Syncb/mc PO Box 965005 Orlando, FL 32896-5005

Syncb/oldnavydc PO Box 965005 Orlando, FL 32896-5005 Syncb/Toys "R" US Attn: Bankruptcy PO Box 965004 Orlando, FL 32896-5004

Syncb/Walmart DC PO Box 965024 Orlando, FL 32896-5024

Synchrony Bank/Amazon Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060

Synchrony Bank/Old Navy Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060

Synchrony Bank/Walmart Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060

Thd/Cbna
PO Box 6497
Sioux Falls, SD 57117-6497

Visa Dept Store National Bank/Macy's Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053

 $_{B201B\;(Fom \c{2.5e})} 19-13559\text{-MBK}$

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| United States | Bankruptcy | Court |
|--------------------|--------------|------------|
| District of New Je | rsey, Trento | n Division |

| IN RE: | Case No. |
|---|-----------|
| Crocitto,, Frank A. Jr. & Crocitto, Chrissy | Chapter 7 |
| Debtor(s) | • |

| | NOTICE TO CONSUMER DEBTOR) OF THE BANKRUPTCY CODE | A(S) |
|---|---|--|
| Certificate of [Non-A | attorney] Bankruptcy Petition Prepare | r |
| I, the [non-attorney] bankruptcy petition preparer signing notice, as required by § 342(b) of the Bankruptcy Code. | the debtor's petition, hereby certify that I de | livered to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition ProAddress: | petition pr the Social principal, the bankru | curity number (If the bankruptcy reparer is not an individual, state Security number of the officer, responsible person, or partner of aptcy petition preparer.) |
| XSignature of Bankruptcy Petition Preparer of officer, printing the state of | ncipal, responsible person, or | by 11 U.S.C. § 110.) |
| partner whose Social Security number is provided above | | |
| Ce | rtificate of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have received an | d read the attached notice, as required by § 34 | 42(b) of the Bankruptcy Code. |
| Crocitto,, Frank A. Jr. & Crocitto, Chrissy | X /s/ Frank A. Crocitto,, Jr. | 1/09/2019 |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | X /s/ Chrissy Crocitto | 1/09/2019 |
| | Signature of Joint Debtor (if a | ny) Date |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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| Fill in this information to identify your case: | |
|--|--------------------------------------|
| Debtor 1 Frank A. Crocitto,, Jr. First Name Middle Name Last Name | |
| Debtor 2 Chrissy Crocitto | |
| (Spouse if, filing) First Name Middle Name Last Name | |
| United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY, TRENTON DIVISION | |
| Case number (if known) | ☐ Check if this is an amended filing |
| Official Form 108 | |
| Statement of Intention for Individuals Filing Under Chapt | ter 7 12/15 |
| If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set whichever is earlier, unless the court extends the time for cause. You must also send copies to the the form | • |

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | |
|---|--|---|--|--|
| Creditor's | ☐ Surrender the property. | □ No | | |
| name: | Retain the property and redeem it. | _ | | |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes | | |
| property | ☐ Retain the property and [explain]: | | | |
| securing debt: | | | | |
| Creditor's | ☐ Surrender the property. | □ No | | |
| name: | ☐ Retain the property and redeem it. | | | |
| Description of | Retain the property and enter into a <i>Reaffirmation</i> Agreement. | ☐ Yes | | |
| property | ☐ Retain the property and [explain]: | | | |
| securing debt: | | | | |
| Creditor's | ☐ Surrender the property. | □ No | | |
| name: | ☐ Retain the property and redeem it. | _ | | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes | | |
| property | ☐ Retain the property and [explain]: | | | |
| securing debt: | | | | |
| Creditor's | ☐ Surrender the property. | □ No | | |

Official Form 108

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| Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Croc | citto, Chrissy | Case number (if known) |) |
|--|--|----------------------------------|---------------------------------------|
| name: | ☐ Retain the propert | • | ☐ Yes |
| Description of | Agreement. | and enter into a Reaffirmation | I |
| property | ☐ Retain the property | and [explain]: | |
| securing debt: | | | |
| Part 2: List Your Unexpired Personal Property lease the | • | ary Contracts and Unavnirgo | I Leases (Official Form 106G) fill in |
| he information below. Do not list real estate may assume an unexpired personal property | leases. Unexpired leases are leases t | hat are still in effect; the lea | |
| Describe your unexpired personal property | leases | | Will the lease be assumed? |
| Lessor's name: Santander Consur | ner USA | | □ No |
| | | | ■ Yes |
| | nt opened 7/1/2016 920.00, Remaining Balance: \$2,8 | 380.00 | |
| Part 3: Sign Below | | | |
| Under penalty of perjury, I declare that I have property that is subject to an unexpired lease | | operty of my estate that sec | cures a debt and any personal |
| X /s/ Frank A. Crocitto,, Jr. | X /s/ C | hrissy Crocitto | |
| Frank A. Crocitto,, Jr. | | ssy Crocitto | |
| Signature of Debtor 1 | | ture of Debtor 2 | |
| Date January 9, 2019 | Date | January 9, 2019 | |

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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| DISTRICT OF NEW JERSEY, TRENTON DIVISION | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|--|--|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | First name | | Chrissy First name |
| | license or passport). | Middle name | - | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Crocitto,, Jr. Last name and Suffix (Sr., Jr., II, III) | _ | Crocitto Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | All other names you have used in the last 8 years | | | Chrissy Gaeta |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9161 | | xxx-xx-8796 |

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Debtor 1 Debtor 2

Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ■ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EINs | EINs |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 204 Villanova Pl Matawan, NJ 07747-3429 | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Monmouth | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Debtor 1 Debtor 2

Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
|------------|---|---|--------------------------|---|------------------------------------|--|--|--|
| | choosing to file under | ■ Chap | oter 7 | | | | | |
| | | ☐ Chap | oter 11 | | | | | |
| | | ☐ Chap | oter 12 | | | | | |
| | | ☐ Chap | oter 13 | | | | | |
| 8. | How you will pay the fee | — ab | out how yo | u may pay. Typicall ey is submitting you | y, if you are paying the fee yours | with the clerk's office in your local court for more details elf, you may pay with cash, cashier's check, or money cutorney may pay with a credit card or check with a | | |
| | | | | | | sign and attach the Application for Individuals to Pay 7 | | |
| | | | • | s <i>tallment</i> s (Official Form 103A). my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is | | | | |
| | | nc yo | t required tur family si | o, waive your fee, a ze and you are una | and may do so only if your income | e is less than 150% of the official poverty line that applied. If you choose this option, you must fill out the <i>Applica</i> | | |
|) . | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 0. | Are any bankruptcy cases pending or being filed by | ■ No | | | | | | |
| | a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your residence? | ■ No. | Go to | ine 12. | | | | |
| | | ☐ Yes. | Has yo | our landlord obtaine | ed an eviction judgment against | you? | | |
| | | | | No. Go to line 12. | | | | |
| | | | | Yes. Fill out Initial | Statement About an Eviction Ju- | dgment Against You (Form 101A) and file it as part of t | | |

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| | • |
|---|---|
| Onseitte Frank A. In O. Onseitte Obeless | |
| Crocitto,, Frank A. Jr. & Crocitto, Chrissy | |
| | |

| Par | Report About Any Bus | sinesses \ | ou Own | as a Sole Proprieto | or |
|-----|---|------------------------|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of bus | iness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it | | Numb | er, Street, City, Stat | te & ZIP Code |
| | to this petition. | | Checi | k the appropriate box | x to describe your business: |
| | | | | Health Care Busin | less (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker | r (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small | deadlines operation | s. If you inc s, cash-flo I16(1)(B). | dicate that you are a low statement, and fe | ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure in 11 oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code. | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | Hazardo | us Property or Any | Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or | ☐ Yes. | What is | the hazard? | |
| | safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number, Street, City, State & Zip Code |
| | | | | | |

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Debtor 1 Debtor 2

Crocitto,, Frank A. Jr. & Crocitto, Chrissy

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Debtor | 1 | |
|--------|---|--|
| Dobtor | 2 | |

Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| 16. | What kind of debts do | 16a. | | | | defined in 11 U.S.C.§ 101(8) as "incurred by an | | | |
|-----|--|--|--|--|-------------------------------|--|-------|--|--|
| | you have? | | individual primarily for a personal,□ No. Go to line 16b. | family, or household p | purpose." | | | | |
| | | | _ | | | | | | |
| | | 4.01 | Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money | | | | | | |
| | | 16b. | for a business or investment or the | | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | | |
| | | 16c. | State the type of debts you owe th | at are not consumer o | debts or busin | ness debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. G | Go to line 18. | | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do yo paid that funds will be available to | | | roperty is excluded and administrative expenses at | re | | |
| | administrative expenses | | ■ No | | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | □ 25,001-50,000 | | | |
| | you estimate that you owe? | □ 50-99 | | <u> </u> | | <u> </u> | | | |
| | | ☐ 100-19 ☐ 200-99 | | 1 0,001-25,000 | 1 | ☐ More than100,000 | | | |
| 40 | Harry marcala da varr | | | Положения о | | — | | | |
| 19. | How much do you estimate your assets to | □ \$0 - \$9 | 50,000 01 - \$100,000 | □ \$1,000,001 - \$ □ \$10,000,001 - | | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion | | | |
| | be worth? | | 001 - \$500,000 | □ \$50,000,001 - | | | | | |
| | | □ \$500,001 - \$1 million | | □ \$100,000,001 | - \$500 million | n ☐ More than \$50 billion | | | |
| 20. | How much do you | □ \$0 - \$9 | | □ \$1,000,001 - \$ | | □ \$500,000,001 - \$1 billion | | | |
| | estimate your liabilities to be? | | 01 - \$100,000 | □ \$10,000,001 - □ \$50,000,001 - | | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$50,000,001 - □ \$100,000,001 | | | | | |
| Par | 7: Sign Below | | | | | | | | |
| For | you | I have exa | amined this petition, and I declare u | nder penalty of perjur | y that the info | ormation provided is true and correct. | | | |
| | | | chosen to file under Chapter 7, I ar ode. I understand the relief available | | | gible, under Chapter 7, 11,12, or 13 of title 11, U e to proceed under Chapter 7. | nited | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | | |
| | | I request | relief in accordance with the chap | ter of title 11, United | States Code, | , specified in this petition. | | | |
| | | case can | | nprisonment for up to | | y or property by fraud in connection with a bankrup both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | otcy | | |
| | | Frank A | a. Crocitto,, Jr. | | Chrissy Cro Signature of D | ocitto | - | | |
| | | Executed | on January 9, 2019 MM / DD / YYYY | E | Executed on | January 9, 2019 | - | | |

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| Debtor 1 | 0 | | |
|----------|----------|-------|---|
| Dobtor 2 | Crocitto | Frank | F |

Crocitto,, Frank A. Jr. & Crocitto, Chrissy

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Kevin Zazzera | Date | January 9, 2019 |
|--|---------------|--------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Kevin Zazzera Printed name | | |
| Kevin B. Zazzera, Esq. | | |
| Firm name | | |
| 182 Rose Ave Ste 3 | | |
| Staten Island, NY 10306-2900 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone | Email address | kzazz007@yahoo.com |
| Kevin Zazzera | | |
| Bar number & State | | |

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|---|--|---|---|
| Fill in this information to identify | | | |
| Pebtor 1 Frank A. Crocitto,, First Name | , Jr. Middle Name Last Name | | |
| Debtor 2 Chrissy Crocitto Spouse, if filing) First Name | Middle Name Last Name | | |
| United States Bankruptcy Court for the: | DISTRICT OF NEW JERSEY, TRENTON DIVISION | | |
| Case number | | _ | ☐ Check if this is an amended filing |
| Official Form 106A/B Schedule A/B: Prope | erty | | 12/15 |
| ink it fits best. Be as complete and accurate formation. If more space is needed, attach a snswer every question. | tems. List an asset only once. If an asset fits in more than or as possible. If two married people are filing together, both ar separate sheet to this form. On the top of any additional page | e equally responsible for su | pplying correct |
| | | | |
| Yes. Where is the property? | What is the property? Check all that each | | |
| Yes. Where is the property? .1 204 Villanova PI Street address, if available, or other description | What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |
| .1 204 Villanova PI Street address, if available, or other description | Single-family home Duplex or multi-unit building Condominium or conversitive | the amount of any secure | ed claims on Schedule D: |
| .1 204 Villanova PI Street address, if available, or other description Matawan NJ 0774 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land PCode Investment property | the amount of any securic Creditors Who Have Cla | ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| .1 204 Villanova PI Street address, if available, or other description Matawan NJ 0774 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Current value of the entire property? \$386,687.00 Describe the nature of | current value of the portion you ownership interest |
| .1 204 Villanova PI Street address, if available, or other description Matawan NJ 0774 City State ZIF | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only | Current value of the entire property? \$386,687.00 Describe the nature of (such as fee simple, ter | Current value of the portion you own? \$386,687.00 your ownership interest nancy by the entireties, or |
| .1 204 Villanova PI Street address, if available, or other description Matawan NJ 0774 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? \$386,687.00 Describe the nature of (such as fee simple, ter a life estate), if known. | Current value of the portion you own? \$386,687.0 your ownership interest nancy by the entireties, or |
| 204 Villanova PI Street address, if available, or other description Matawan NJ 0774: City State ZIF | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only | Current value of the entire property? \$386,687.00 Describe the nature of (such as fee simple, ter a life estate), if known. Tenancy by the E | Current value of the portion you ownership interest nancy by the entirety |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

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| | / 00 | | | | |
|--|--|---|--|--|--|
| _ | res | | | | |
| 3.1 | Make: | Mitsubishi | Who has an interest in the property? Check one | | laims or exemptions. Put |
| | Model: | Outlander Sport 4WD | Debtor 1 only | | ed claims on Schedule D: ims Secured by Property. |
| | Year: | 2011 | Debtor 2 only | | |
| | Approxin | nate mileage: 93000 | - | Current value of the entire property? | Current value of the portion you own? |
| | | ormation: | ☐ At least one of the debtors and another | | |
| | | | Check if this is community property (see instructions) | \$3,874.00 | \$3,874.00 |
| 3.2 | Make: Model: | Indian Chieftain | Who has an interest in the property? Check one ☐ Debtor 1 only | the amount of any secur | claims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |
| | Year: | 2016 | Debtor 2 only | | |
| | | nate mileage: 7500 | _ | Current value of the entire property? | Current value of the portion you own? |
| | | ormation: | _ Debtor Fand Debtor 2 only ☐ At least one of the debtors and another | onthis property i | Portion 300 0mm |
| | | | Check if this is community property (see instructions) | \$7,500.00 | \$7,500.00 |
| | <i>mples:</i> B | | and other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle acce | | |
| Exa ■ I | imples: Bi No Yes | oats, trailers, motors, personal v | ratercraft, fishing vessels, snowmobiles, motorcycle acce | essories | |
| Exa | imples: Bi No Yes Id the do | oats, trailers, motors, personal v | | essories / entries for pages | \$11,374.00 |
| Exa | imples: Bi No Yes Id the do | oats, trailers, motors, personal v | eatercraft, fishing vessels, snowmobiles, motorcycle accernicates and accernicate accernicates and accernicate accernicates and accernicate accernicates accernicate accernicates accernica | essories / entries for pages | \$11,374.00 |
| Exa | mples: B | oats, trailers, motors, personal value of the portion you outtached for Part 2. Write that | watercraft, fishing vessels, snowmobiles, motorcycle accertification with the state of the state | essories / entries for pages | |
| Exa | mples: B | oats, trailers, motors, personal value of the portion you outtached for Part 2. Write that | watercraft, fishing vessels, snowmobiles, motorcycle accertification with the state of the state | essories / entries for pages | \$11,374.00 Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Exact Signature of the control of th | mples: Brown of the double of | ollar value of the portion you of trached for Part 2. Write that the Your Personal and Household or have any legal or equitable goods and furnishings Major appliances, furniture, liner | own for all of your entries from Part 2, including any number here | essories / entries for pages | Current value of the portion you own? Do not deduct secured |
| Exact Solve Hoo | mples: Bring in the document of the document o | ullar value of the portion you of trached for Part 2. Write that the Your Personal and Household or have any legal or equitable goods and furnishings Major appliances, furniture, liner scribe | own for all of your entries from Part 2, including any number here | essories / entries for pages | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Exact Solve Hoo | mples: Brown of the double of | ollar value of the portion you of trached for Part 2. Write that the Your Personal and Household or have any legal or equitable goods and furnishings Major appliances, furniture, liner | own for all of your entries from Part 2, including any number here | essories / entries for pages | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Example Electric Electric Example Example Electric Example Electric Electric Example Electric Electric Example Electric | mples: Brandles: | ollar value of the portion you of trached for Part 2. Write that the Your Personal and Household or have any legal or equitable goods and furnishings Major appliances, furniture, liner scribe | wwn for all of your entries from Part 2, including any number here | essories / entries for pages=> | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Example Exampl | mples: Brandles: | oats, trailers, motors, personal value of the portion you outtached for Part 2. Write that the Your Personal and Household or have any legal or equitable goods and furnishings Major appliances, furniture, liner scribe | wwn for all of your entries from Part 2, including any number here | essories / entries for pages=> | Current value of the portion you own? Do not deduct secured claims or exemptions. |

collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

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| 17.1. Checking Account Chase | | \$200.00 |
|---|--|--|
| | | |
| institutions. If you have multiple accounts with the same | institution, list each. | uses, and other similar |
| | cash | \$100.00 |
| | | **** |
| in or have any legal of equitable interest in any of the folic | ywiiig: | portion you own? Do not deduct secured claims or exemptions. |
| scribe Your Financial Assets | owing? | Current value of the |
| the dollar value of all of your entries from Part 3, including | | \$1,400.00 |
| her personal and household items you did not already list Give specific information | , including any health aids you did not list | |
| Describe | | |
| rm animals oles: Dogs, cats, birds, horses | | |
| | iding rings, neirioom jeweiry, watches, gems, gok | a, silver |
| y / | | d -:} |
| Describe clothes | | \$400.00 |
| | s, accessories | |
| Describe | | |
| ns oles: Pistols, rifles, shotguns, ammunition, and related equipm | ent | |
| Describe | | |
| ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; instruments | bicycles, pool tables, golf clubs, skis; canoes an | d kayaks; carpentry tools; musica |
| | es: Sports, photographic, exercise, and other hobby equipment; instruments Describe Describe Describe Describe Clothes Cl | as: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes an instruments Describe 18 19 10es: Pistols, rifles, shotguns, ammunition, and related equipment Describe Soles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe Clothes Clothes Clothes Describe The animals Joles: Dogs, cats, birds, horses Describe The personal and household items you did not already list, including any health aids you did not list Give specific information The dollar value of all of your entries from Part 3, including any entries for pages you have attached for 3. Write that number here Scribe Your Financial Assets In or have any legal or equitable interest in any of the following? Describes: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition cash 18 18 18 19 19 10 19 10 19 10 19 10 19 10 19 10 19 10 19 10 19 10 19 10 19 10 19 10 19 10 19 10 19 10 10 10 10 10 10 10 10 10 10 10 10 10 |

Institution or issuer name: ☐ Yes.....

Case 19-13559-MBK Doc 1 Filed 02/21/19 Entered 02/21/19 12:26:08 Page 23 of 75 Document Debtor 1 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known) Debtor 2 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements \square Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

■ No

☐ Yes. Give specific information.....

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☐ Yes. Give specific information.......

■ No

Examples: Season tickets, country club membership

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known)

Debtor 2 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$386,687.00 56. Part 2: Total vehicles, line 5 \$11,374.00 57. Part 3: Total personal and household items, line 15 \$1,400.00 58. Part 4: Total financial assets, line 36 \$300.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$13,074.00 Copy personal property total \$13,074.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$399,761.00

Official Form 106A/B Schedule A/B: Property page 6

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| | | | Document | | Page 26 of 75 | _ |
|--------------------------|--|---|--|--------------------------------------|---|---|
| | Fill in this | information to identify | your case: | | | |
| De | ebtor 1 | Frank A. Crocitto | ,, Jr. | | | |
| _ | 10 | First Name | Middle Name | L | _ast Name | |
| | ebtor 2 oouse if, filing) | First Name | Middle Name | L | Last Name | |
| Un | nited States Ban | kruptcy Court for the: | DISTRICT OF NEW JERSEY | , TR | ENTON DIVISION | |
| | ase number | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| O ¹ | fficial For | m 106C | | | | |
| S | chedule | C: The Pro | perty You Clai | m | as Exempt | 4/16 |
| oro _l out | perty you listed o | on Schedule A/B: Proper | rty (Official Form 106A/B) as you | r sou | urce, list the property that you claim a | oplying correct information. Using the s exempt. If more space is needed, fill s, write your name and case number (if |
| app app un to a | ecific dollar amo plicable statuto ids—may be un | ount as exempt. Altern ry limit. Some exempti Ilimited in dollar amou lar amount and the val | atively, you may claim the full ons—such as those for health nt. However, if you claim an ex | l fair n aid: xem _l | s, rights to receive certain benefits | g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemptior |
| Pa | art 1: Identify | the Property You Clai | im as Exempt | | | |
| 1. | Which set of | exemptions are you cla | aiming? Check one only, even i | f vou | ır spouse is filina with vou. | |
| | _ | • | onbankruptcy exemptions. 11 U | - | | |
| | _ | · · | . 11 U.S.C. § 522(b)(2) | | 3(-)(-) | |
| 2 | | | ule A/B that you claim as exem | nt f | ill in the information below | |
| ۷. | | n of the property and line | • | • | ount of the exemption you claim | Specific laws that allow exemption |
| | | hat lists this property | portion you own Copy the value from | | eck only one box for each exemption. | Specific laws that allow exemption |
| | | | Schedule A/B | One | on only one box for each exemption. | |
| De | ebtor 1 Exem | <u>ptions</u> | | | | 44 LISC & E22/d\/E\ |
| | 204 Villanov | | \$386,687.00 | | \$1,800.00 | 11 USC § 522(d)(5) |
| | | J, 07747-3429 onmouth County edule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | — | | |
| | 204 Villanov | | \$386,687.00 | | \$23,700.00 | 11 USC § 522(d)(5) |
| | | J, 07747-3429 onmouth County edule A/B 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | | \$386,687.00 | | | 11 USC § 522(d)(1) |
| | | J, 07747-3429 onmouth County | | • | 100% of fair market value, up to any applicable statutory limit | |
| | Mitsubishi | | \$3,874.00 | _ | | 11 USC § 522(d)(2) |

2011

93000

100% of fair market value, up to

any applicable statutory limit

Outlander Sport 4WD

Line from Schedule A/B: 3.1

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| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|----|--|--------------------------------------|--------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | furniture Line from Schedule A/B. 6.1 | \$1,000.00 | | | 11 USC § 522(d)(3) |
| | Line from Schedule A/B. 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | clothes | \$400.00 | | | 11 USC § 522(d)(5) |
| | Line from Schedule A/B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | cash | \$100.00 | | | 11 USC § 522(d)(5) |
| | Line from Schedule A/B 16.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Chase checking | \$200.00 | | | 11 USC § 522(d)(5) |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 | | | on or after the date of adjustment.) | |
| | ■ No | | | | |
| | ☐ Yes. Did you acquire the property covere | d by the exemption within | n 1,21 | 5 days before you filed this case? | |
| | Π No | | • | • | |

| 3. | Are you claiming a | homestead exem | ption of more t | han \$160,375 |
|----|--------------------|----------------|-----------------|---------------|
| | | | | |

Yes

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| Fill | in this inform | nation to identify your case | : : | | | | | | |
|---------------------|---|---|---|--|---|--|--|--|--|
| Del | btor 1 | | | | | | | | |
| | | First Name | Middle Name | Last Name | } | | | | |
| | btor 2 buse if, filing) | Chrissy Crocitto First Name | Middle Name | Last Name | | | | | |
| | | | | | | | | | |
| Uni | ited States Bai | nkruptcy Court for the: D | ISTRICT OF NEW JERSE | Y, TRENTON DIVISION | | | | | |
| | se number | | | | ☐ Check if this is an amended filing | | | | |
| Of | ficial Fo | rm 106C | | | | | | | |
| Sc | chedule | e C: The Prop | erty You Cla | im as Exempt | 4/16 | | | | |
| prop | erty you listed and attach to th | on Schedule A/B: Property (| Official Form 106A/B) as yo | gether, both are equally responsible for sup ur source, list the property that you claim a cessary. On the top of any additional page: | s exempt. If more space is needed, fill | | | | |
| func to a app | ds—may be u particular do licable statuto | nlimited in dollar amount. llar amount and the value | However, if you claim an of the property is determine | th aids, rights to receive certain benefit exemption of 100% of fair market value ned to exceed that amount, your exemp | under a law that limits the exemption | | | | |
| 1. | Which set of | exemptions are you claim | ing? Check one only, even | if your spouse is filing with you. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | |
| | ☐ You are cla | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | |
| | ■ You are cla | airiing state and rederal north | ankruptcy exemptions. 11 | U.S.C. § 522(b)(3) | | | | | |
| 2 | For any prop | aiming state and rederal north | . , . | U.S.C. § 522(b)(3) | | | | | |
| | a, p | aiming federal exemptions. | 1 U.S.C. § 522(b)(2) | U.S.C. § 522(b)(3) mpt, fill in the information below. | | | | | |
| | Brief description | aiming federal exemptions. | 11 U.S.C. § 522(b)(2) A/B that you claim as exer | . , , , | Specific laws that allow exemption | | | | |
| | Brief description | naiming federal exemptions. 1 nerty you list on Schedule and on of the property and line on | 11 U.S.C. § 522(b)(2) A/B that you claim as exer Current value of the | mpt, fill in the information below. | Specific laws that allow exemption | | | | |
| | Brief descripti Schedule A/B | perty you list on Schedule and on of the property and line on that lists this property | 11 U.S.C. § 522(b)(2) A/B that you claim as exeromorphic control value of the portion you own Copy the value from | mpt, fill in the information below. Amount of the exemption you claim | Specific laws that allow exemption | | | | |
| | Brief descripti Schedule A/B | perty you list on Schedule and on of the property and line on that lists this property nptions on: | 11 U.S.C. § 522(b)(2) A/B that you claim as exeromorphic control value of the portion you own Copy the value from | mpt, fill in the information below. Amount of the exemption you claim | Specific laws that allow exemption | | | | |
| | Brief descripti Schedule A/B | perty you list on Schedule and on of the property and line on that lists this property nptions on: | 11 U.S.C. § 522(b)(2) A/B that you claim as exeromorphic control value of the portion you own Copy the value from | mpt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |

Yes

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| | | Document | Page 29 | of 75 | | |
|--|------------------------|---|-----------------|---------------------------------|------------------------|--------------------------|
| Fill in this info | rmation to identi | fy your case: | | | | |
| Debtor 1 Fr | ank A. Crocitte | o .lr | | | | |
| - · · · · · <u>- · · · · · · · · · · · · ·</u> | t Name | Middle Name | Last Name | | . } | |
| Debtor 2 Cr | rissy Crocitto | | | | | |
| | t Name | Middle Name | Last Name | | | |
| United Ctates Dealswint | ou. Court for the | DISTRICT OF NEW JERSEY T | DENITON DI | /ISION | | |
| United States Bankrupt | cy Court for the: | DISTRICT OF NEW JERSEY, T | KEINTON DI | VISION | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | amend | ed filing |
| | | | | | | |
| Official Form 10 | <u>6D</u> | | | | | |
| Schedule D. (| Creditors | Who Have Claims S | Secureo | hy Propert | V | 12/15 |
| ochedate b. (| or cartor 5 | Who have draining s | occur cc | a by 1 Topert | <u>y</u> | 12/13 |
| | | two married people are filing together | | | | |
| needed, copy the Additior known). | nal Page, fill it out, | number the entries, and attach it to the | nis form. On th | e top of any additional | pages, write your name | and case number (if |
| 1. Do any creditors have o | laims secured by | your property? | | | | |
| | • | | | | | |
| No. Check this b | ox and submit this | s form to the court with your other sch | nedules. You i | nave nothing else to re | port on this form. | |
| Yes. Fill in all of t | the information be | low. | | | | |
| Part 1: List All Secu | red Claims | | | | | |
| , | | ore than one secured claim, list the credi | itor congratoly | Column A | Column B | Column C |
| | | a particular claim, list the other creditors i | | Amount of claim | Value of collateral | Unsecured |
| much as possible, list the o | claims in alphabetica | al order according to the creditor 's name | Э. | Do not deduct the | that supports this | portion |
| 2.1 Chrysler Capit | 2 | Describe the property that secures the | ne claim: | value of collateral. \$2,880.00 | claim \$0.00 | If any \$2,880.00 |
| Creditor's Name | <u> </u> | leased vehicle | 1 . | Ψ2,000.00 | Ψ0.00 | Ψ2,000.00 |
| Santander Cor | nsumer | leased verificie | | | | |
| USA | | | | | | |
| PO Box 96127 | 5 | As of the date you file, the claim is: C apply. | Check all that | | | |
| Fort Worth, TX | | Contingent | | | | |
| 76161-0275 | | | | | | |
| Number, Street, City, St | tate & Zip Code | Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the debt? Ch | neck one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as m | nortgage or sec | ured | | |
| Debtor 2 only | | car loan) | | | | |
| ■ Debtor 1 and Debtor 2 | only | ☐ Statutory lien (such as tax lien, mech | hanic's lien) | | | |
| ☐ At least one of the debt | ors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim rel | ates to a | ☐ Other (including a right to offset) | | | | |
| community debt | | | | | | |
| Date debt was incurred | | Last 4 digits of account number | er 8727 | | | |
| | | | | | | |
| 2.2 Gateway Morto | nage Grn | Describe the property that secures th | ne claim: | \$339,880.00 | \$386,687.00 | \$0.00 |
| Creditor's Name | Jage Oip | 204 Villanova PI, Matawan, N | | ψοσο,σοσ.σσ | Ψοσο,σογ.σο | Ψ0.00 |
| | | 07747-3429 | •• | | | |
| | | residence | | | | |
| ATTN: Bankru | | As of the date you file, the claim is: C | Check all that | | | |
| 244 S Gateway Jenks, OK 740 | | apply. | | | | |
| | | Contingent | | | | |
| Number, Street, City, S | tate & Zip Code | Unliquidated | | | | |
| Who owes the debt? Ch | ook ono | Disputed Nature of lien. Check all that apply | | | | |
| _ | IEUR UITE. | Nature of lien. Check all that apply. | | unad | | |
| Debtor 1 only | | An agreement you made (such as m car loan) | nortgage or sec | urea | | |
| Debtor 2 only | | _ | | | | |
| Debtor 1 and Debtor 2 | • | Statutory lien (such as tax lien, mech | hanic's lien) | | | |
| At least one of the debt | | Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim rel | ates to a | Other (including a right to offset) | | | | |
| community debt | | | | | | |
| Date debt was incurred | 2016-02 | Last 4 digits of account number | er 3077 | | | |

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| Debtor 1 Frank A. Crocitto,, Jr. | | Case number (f known) | | | | |
|--|---|--|-------------------------|------------|--|--|
| First Name Middle N | ame Last Name | _ | | | | |
| Debtor 2 Chrissy Crocitto | | | | | | |
| First Name Middle N | ame Last Name | | | | | |
| 2.3 Performance Finance | Describe the property that secures the cla | nim: \$10,014.00 | \$7,500.00 | \$2,514.00 | | |
| Creditor's Name | 2016 Indian Chieftain | \$10,014.00 | Ψ <i>1</i> ,300.00 | ΨZ,314.00 | | |
| ordator o reality | 2016 Indian Chieffain | | | | | |
| 10509 Professional Cir Reno, NV 89521-5864 | As of the date you file, the claim is: Check apply. | all that | | | | |
| <u> </u> | Contingent | | | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | | | |
| Miles awas the debt2 Objects are | Disputed | | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | | |
| Debtor 1 only | An agreement you made (such as mortgage or secured | | | | | |
| ☐ Debtor 2 only | car loan) | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | | | |
| Date debt was incurred 2018-06 | Last 4 digits of account number | 4035 | | | | |
| | | | | | | |
| Add the dollar value of your entries in Col | umn A on this page. Write that number here | s: \$352,774.00 | | | | |
| If this is the last page of your form, add th | e dollar value totals from all pages. | \$352,774.00 | | | | |
| Write that number here: | | \$332,774.00 | | | | |
| Part 2: List Others to Be Notified for | r a Debt That You Already Listed | | | | | |
| trying to collect from you for a debt you o | e notified about your bankruptcy for a debt we to someone else, list the creditor in Part you listed in Part 1, list the additional credi is page. | 1, and then list the collection agency | here. Similarly, if you | have more | | |
| Name, Number, Street, City, State & 2 | Zip Code | On which line in Part 1 did you enter th | e creditor? 2.2 | | | |
| Gateway Mortgage Grp 244 S Gateway Pl Jenks, OK 74037-3448 | | Last 4 digits of account number | <u>7_</u> | | | |

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| | Case 19-15559-MBK DOC | Document Page 3 | 1 of 75 | 20.00 Desciviani |
|---------------------------------|--|--|-------------------------------------|--|
| Fill | in this information to identify your case: | | 1 ()1 7.3 | |
| | * * | | | |
| Debtor | 114111(711 01001110), 011 | liddle Name Last Name | | |
| Debtor | 2 Chrissy Crocitto | | | |
| (Spouse | | liddle Name Last Name | | |
| United | States Bankruptcy Court for the: DISTR | RICT OF NEW JERSEY, TRENTON D | DIVISION | |
| Case n | number | | | |
| (if known | n) | | | ☐ Check if this is an |
| | | | | amended filing |
| Offici | al Form 106E/F | | | |
| | edule E/F: Creditors Who H | ave Unsecured Claims | | 12/15 |
| | omplete and accurate as possible. Use Part 1 f | | Part 2 for creditors with NONI | |
| D: Credi the Cont case nu | e G: Executory Contracts and Unexpired Leas tors Who Have Claims Secured by Property. If time to this page. If you have no infomber (if known). | more space is needed, copy the Part your mation to report in a Part, do not file the | ou need, fill it out, number the | e entries in the boxes on the left. Attach |
| Part 1: | | | | |
| _ | any creditors have priority unsecured claims | against you? | | |
| _ | No. Go to Part 2. | | | |
| | Yes. | | | |
| Part 2: | | | | |
| _ | any creditors have nonpriority unsecured clai | - | | |
| ш | No. You have nothing to report in this part. Subm | it this form to the court with your other sche | edules. | |
| | Yes. | | | |
| uns | t all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each n one creditor holds a particular claim, list the oth | claim. For each claim listed, identify what t | ype of claim it is. Do not list cla | ims already included in Part 1. If more |
| | | | | Total claim |
| 4.1 | Capital One | Last 4 digits of account number | 2986 | \$6,098.00 |
| | Nonpriority Creditor's Name | When we the debt in some 10 | 0040.40 | |
| | Attn: Bankruptcy PO Box 30285 | When was the debt incurred? | 2013-10 | |
| | Salt Lake City, UT 84130-0285 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce th | at you did not |
| | No | Debts to pension or profit-sharin | ng plans, and other similar debt | s |
| | Yes | | • | - |
| | □ 169 | Other. Specify Revolving | account | |

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| Chase Card Services | Last 4 digits of account number 19 | <u> </u> | \$9,13 |
|--|---|---|-----------------|
| Nonpriority Creditor's Name Correspondence Dept PO Box 15298 | When was the debt incurred? 20 | 14-08 | |
| Wilmington, DE 19850-5298 | | | |
| Number Street City State ZIp Code | As of the date you file, the claim is: Ch | neck all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured clai | m: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separation report as priority claims | n agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing plan | ns, and other similar debts | |
| Yes | Other. Specify Revolving acco | ount | |
| Chase Card Services | Last 4 digits of account number 60 | 060 | \$4,0 |
| Nonpriority Creditor's Name Correspondence Dept | When was the debt incurred? 20 | 15-08 | |
| PO Box 15298 | When was the dept mounted. | 113-00 | |
| Wilmington, DE 19850-5298 | _ | | |
| Number Street City State ZIp Code | As of the date you file, the claim is: Ch | neck all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured clai | m: | |
| ☐ Check if this claim is for a community debt | Student loans | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a separation report as priority claims | agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing plan | ns, and other similar debts | |
| □ Yes | Other. Specify Revolving acco | ount | |
| Citi/CBNA | Last 4 digits of account number 14 | 110 | \$3,90 |
| Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized | | <u> </u> | +0,0 |
| Bankruptcy PO Box 790040S | | | |
| Louis, MO 63113 Number Street City State Zlp Code | As of the date you file, the claim is: Ch | and all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim is. Of | еск ан тат арріу | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured clai | m: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt | ☐ Obligations arising out of a separation | agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharing plan | ns, and other similar debts | |
| ☐ Yes | ■ Other, Specify Revolving acco | ount | |

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known) 4.5 Last 4 digits of account number Citi/Sears 6299 \$5,158.00 Nonpriority Creditor's Name Citibank/Centralized Bankruptcy When was the debt incurred? 2014-03 PO Box 790034 Saint Louis, MO 63179-0034 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes 4.6 Citi/Sears Last 4 digits of account number \$3,993.00 6184 Nonpriority Creditor's Name Citibank/Centralized Bankruptcy When was the debt incurred? 2018-09 PO Box 790034 Saint Louis, MO 63179-0034 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Revolving account 4.7 Citibank Last 4 digits of account number 8416 \$11,858.00 Nonpriority Creditor's Name Centralized Bankruptcy When was the debt incurred? 2005-09 PO Box 790034 Saint Louis, MO 63179-0034 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Revolving account

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| Crocitto,, Frank A. Jr. & Crocitto, | Chrissy | Case number (f known) | |
|---|--|---|------------|
| Citibank Nonpriority Creditor's Name | Last 4 digits of account number | 1792 | \$7,372.00 |
| Centralized Bankruptcy PO Box 790034 | When was the debt incurred? | 2015-05 | |
| Saint Louis, MO 63179-0034 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | , | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Installmen | | |
| Citibank/Best Buy | Last 4 digits of account number | 2870 | \$2,009.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | 2014-04 | |
| Attn: Bankruptcy PO Box 790441 Saint Louis, MO 63179-0441 | when was the debt incurred? | 2014-04 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Revolving | account | |
| Citibank/the Home Depot | Last 4 digits of account number | 9053 | \$5,032.00 |
| Nonpriority Creditor's Name Attn: Recovery/Centralized | When was the debt incurred? | 2017-12 | |
| Bankruptcy PO Box 790034 Saint Louis, MO 63179-0034 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| Check if this claim is for a community | ☐ Student loans | | |
| debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | 3 | |
| ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐Yes | ■ Other, Specify Revolving | account | |

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| Debto Debto | r 1 Crocitto,, Frank A. Jr. & Crocitto, | Chrissy | Case number (f known) | | |
|----------------|--|---|---|------------|--|
| 4.11 | Citicards Cbna | Last 4 digits of account number | 4269 | \$9,678.00 | |
| | Nonpriority Creditor's Name Citi Bank PO Box 6077 | When was the debt incurred? | 2016-10 | | |
| | Sioux Falls, SD 57117-6077 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Revolving | account | | |
| 4.12 | Citicards Cbna | Last 4 digits of account number | 0330 | \$8,039.00 | |
| | Nonpriority Creditor's Name Citi Bank PO Box 6077 | When was the debt incurred? | 2014-12 | | |
| | Sioux Falls, SD 57117-6077 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Revolving | account | | |
| 4.13 | Comenity Bank/Pottery Barn Nonpriority Creditor's Name | Last 4 digits of account number | 0112 | \$1,418.00 | |
| | Attn: Bankruptcy Dept PO Box 182125 | When was the debt incurred? | 2018-11 | | |
| | Columbus, OH 43218-2125 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | □Yes | ■ Other. Specify Revolving | account | | |

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| Crocitto,, Frank A. Jr. & Crocitto, | Chrissy | Case number (f known) | |
|--|--|---|-------------|
| Comenity Bank/Victoria Secret Nonpriority Creditor's Name | Last 4 digits of account number | 4633 | \$993.00 |
| Attn: Bankruptcy Dept PO Box 182125 | When was the debt incurred? | 2015-06 | |
| Columbus, OH 43218 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | 7.0 0 | or chook all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify Revolving | account | |
| Comenity Capital/Mprc | Last 4 digits of account number | 7748 | \$811.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | 2040.00 | |
| Attn: Bankruptcy Dept PO Box 182125 Columbus, OH 43218-2125 | when was the dept incurred? | 2018-09 | |
| Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify Revolving | account | |
| Costco Go Anywhere Citicard | Last 4 digits of account number | 3053 | \$10,946.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | 2016 06 | |
| Citicorp Credit Services/Centralized Ban PO Box 790040 | when was the debt incurred? | 2016-06 | |
| Saint Louis, MO 63101 | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | | | |
| Debtor 2 only | ☐ Contingent | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ At least one or the debtors and another ☐ Check if this claim is for a community | Student loans | | |
| debt | _ | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | 3 | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Revolving | account | |
| | , | | |

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| 4.47 | | to a definition of the second of the second | | 40.000.00 |
|------|--|--|---|------------|
| 4.17 | Jewelers Reserve Card Nonpriority Creditor's Name | Last 4 digits of account number | 1410 | \$2,663.00 |
| | | When was the debt incurred? | | |
| | PO Box 9001006 | | | |
| | Louisville, KY 40290-1006 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| | No | report as priority claims Debts to pension or profit-sharir | og plans, and other similar debts | |
| | ☐ Yes | | ig plans, and other similar debts | |
| | Li Tes | Other. Specify | | |
| 4.18 | Nelnet | Last 4 digits of account number | 6874 | \$645.00 |
| | Nonpriority Creditor's Name Attn: Claims | When was the debt incurred? | 2001-12 | |
| | PO Box 82505 | | 2001 12 | |
| | Lincoln, NE 68501-2505 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharir | ng plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Installmen | t account | |
| 4.19 | Nelnet | Last 4 digits of account number | 6974 | \$624.00 |
| | Nonpriority Creditor's Name Attn: Claims | When was the debt incurred? | 2002-08 | |
| | PO Box 82505 | | | |
| | Lincoln, NE 68501-2505 | | in Ohankallahat anak | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Installmen | t account | |

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known) 4.20 Last 4 digits of account number Nelnet 6774 \$396.00 Nonpriority Creditor's Name Attn: Claims When was the debt incurred? 2002-08 PO Box 82505 Lincoln, NE 68501-2505 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Installment account 4.21 Nelnet \$396.00 Last 4 digits of account number 6674 Nonpriority Creditor's Name When was the debt incurred? Attn: Claims 2001-12 PO Box 82505 Lincoln, NE 68501-2505 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Installment account 4.22 **Nordstrom FSB** Last 4 digits of account number \$4,417.00 9496 Nonpriority Creditor's Name ATTN: Bankruptcy When was the debt incurred? 2014-10 PO Box 6555 Englewood, CO 80155-6555 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes

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| Debto | Crocitto,, Frank A. Jr. & Crocitto, | Chrissy | Case number (f known) | |
|-------|--|--|---|------------|
| 4.23 | Syncb/Toys "R" US Nonpriority Creditor's Name | Last 4 digits of account number | 8543 | \$1,175.00 |
| | Attn: Bankruptcy PO Box 965004 | When was the debt incurred? | 2017-12 | |
| | Orlando, FL 32896-5004 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Revolving | | |
| 4.24 | Synchrony Bank/Amazon | Last 4 digits of account number | 8118 | \$1,785.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept | When was the debt incurred? | 2018-05 | |
| | PO Box 965060 Orlando, FL 32896-5060 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Revolving | account | |
| 4.25 | Synchrony Bank/Old Navy Nonpriority Creditor's Name | Last 4 digits of account number | 4894 | \$7,460.00 |
| | Attn: Bankruptcy Dept PO Box 965060 | When was the debt incurred? | 2014-10 | |
| | Orlando, FL 32896-5060 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Спеск ан tnat apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | 0 0 1 | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharin | | |
| | ☐ Yes | Other. Specify Revolving | account | |

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| Crocitto,, Frank A. Jr. & Crocitto, | Chrissy | Case number (f known) | |
|---|--|--|------------|
| Synchrony Bank/Walmart Nonpriority Creditor's Name | Last 4 digits of account number | 8658 | \$1,901.00 |
| Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060 | When was the debt incurred? | 2016-11 | |
| Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Revolving | account | |
| Visa Dept Store National Bank/Macy's | Last 4 digits of account number | 4835 | \$4,151.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy PO Box 8053 | When was the debt incurred? | 2014-09 | |
| Mason, OH 45040-8053 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| Who incurred the debt? Check one. | 7.0 0 , , | or one on an anal appry | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | , | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Revolving | account | |
| Visa Dept Store National Bank/Macy's | Last 4 digits of account number | 7983 | \$3,778.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053 | When was the debt incurred? | 2012-11 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane, and other similar debts | |
| ■ No | | | |
| Yes | Other. Specify Revolving | account | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known) have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Best Buv/Cbna** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6497 Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117-6497 Last 4 digits of account number 2870 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Capital One** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 30253 Part 2: Creditors with Nonpriority Unsecured Claims Salt Lake City, UT 84130-0253 Last 4 digits of account number 2986 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Chase Card** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 15298 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19850-5298 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Chase Card** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 15298 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19850-5298 Last 4 digits of account number 6060 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citi Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6190 ■ Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117-6190 Last 4 digits of account number 3053 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citibank N A Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 769006 ■ Part 2: Creditors with Nonpriority Unsecured Claims San Antonio, TX 78245-9006 Last 4 digits of account number 1792 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citibank NA Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6181 Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117-6181 Last 4 digits of account number 8416 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citicards Chna Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6217 ■ Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117-6217 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citicards Cbna Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6217 ■ Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117-6217 Last 4 digits of account number 0330 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Comenity Bank/Pttrybrn Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 182789 ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43218-2789 Last 4 digits of account number 0112 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Comenitybank/victoria Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 182789 ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43218-2789 Last 4 digits of account number 4633

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| Debtor 2 Crocitto,, Frank A. Jr. & C | rocitto, Chrissy | Case number (f known) | |
|---|--|---|--|
| | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | · <u> </u> | |
| Comenitycb/myplacerwds PO Box 182120 | Line 4.15 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | |
| Columbus, OH 43218-2120 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| , | Last 4 digits of account number | 7748 | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | |
| Dsnb Macys | Line <u>4.27</u> of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| PO Box 8218 Mason, OH 45040-8218 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Mason, On 43040-0210 | Last 4 digits of account number | 4835 | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | |
| Dsnb Macys | Line 4.28 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| PO Box 8218 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Mason, OH 45040-8218 | Last 4 digits of account number | 7983 | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | |
| Jewelers Reserve/Cbna | Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| PO Box 6497 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Sioux Falls, SD 57117-6497 | Last 4 digits of account number | 1410 | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | |
| Nelnet Lns | Line 4.18 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| 3015 S Parker Rd Aurora, CO 80014-2904 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Autora, CO 60014-2904 | Last 4 digits of account number | 6874 | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | |
| Nelnet Lns | Line 4.19 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| 3015 S Parker Rd Aurora, CO 80014-2904 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Autora, CO 60014-2904 | Last 4 digits of account number | 6974 | |
| Name and Address | On which entry in Part 1 or Part 2 d | | |
| Nelnet Lns | Line <u>4.20</u> of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| 3015 S Parker Rd Aurora, CO 80014-2904 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Autora, 00 00014-2304 | Last 4 digits of account number | 6774 | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | |
| Nelnet Lns | Line <u>4.21</u> of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| 3015 S Parker Rd Aurora, CO 80014-2904 | | Part 2: Creditors with Nonpriority Unsecured Claims | |
| Autora, 00 00014 2004 | Last 4 digits of account number | 6674 | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | |
| Nordstrom/Td Bank USA | Line <u>4.22</u> of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| 13531 E Caley Ave Englewood, CO 80111-6504 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Linglewood, oo oo i i i ooo | Last 4 digits of account number | 9496 | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | |
| Sears/Cbna | Line <u>4.5</u> of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| PO Box 6217 Sioux Falls, SD 57117-6217 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| SISUA I AIIS, SD 3/ 11/*921/ | Last 4 digits of account number | 6299 | |
| Name and Address | On which entry in Part 1 or Part 2 d | | |
| Sears/Cbna | Line 4.6 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | |
| PO Box 6217 Sioux Falls, SD 57117-6217 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| | Last 4 digits of account number | 6184 | |

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| Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Cro | ocitto, Chrissy | Case number (if known) | | | | |
|---|--|---|--|--|--|--|
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | | | | |
| Syncb/amazon | Line 4.24 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| PO Box 965015 Orlando, FL 32896-5015 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Orialiuo, FL 32030-3013 | Last 4 digits of account number | 8118 | | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | | | | |
| Syncb/mc | Line 4.23 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| PO Box 965005 Orlando, FL 32896-5005 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Onanido, i E 32030-3003 | Last 4 digits of account number | 8543 | | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | |
| Syncb/oldnavydc | Line 4.25 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| PO Box 965005 Orlando, FL 32896-5005 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Onando, i E 32030-3003 | Last 4 digits of account number | 4894 | | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | | | | |
| Syncb/Walmart DC | Line 4.26 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| PO Box 965024 Orlando, FL 32896-5024 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Oriando, i E 32030-3024 | Last 4 digits of account number | 8658 | | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | | | | |
| Thd/Cbna | Line 4.10 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| PO Box 6497 Sioux Falls, SD 57117-6497 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| 010ux 1 ulls, 0D 01 111-0401 | Last 4 digits of account number | 9053 | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

^{6.} Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | _ |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 2,061.00 |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | | |
| Holli Part 2 | og. | you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 117,918.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 119,979.00 |

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| Fill in th | nis information to identi | fy your case: | | | |
|---------------------|---------------------------|---------------------|------------------------|---|---------------------|
| Debtor 1 | Frank A. Crocitto | o,, Jr. | | | |
| | First Name | Middle Name | Last Name |) | |
| Debtor 2 | Chrissy Crocitto | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEW JEF | RSEY, TRENTON DIVISION | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property(Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Santander Consumer USA
Attn: Bankruptcy
PO Box 961245
Fort Worth, TX 76161-0244

State what the contract or lease is for
Installment account opened 7/1/2016
Credit Limit: \$14,920.00, Remaining Balance: \$2,880.00

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| | Case 13-13333-MDK | Doc 1 Tiled (| _ | 75 | Desc Main |
|-------------------------|--|--|--------------------------------|---|--------------------------------|
| ا | Fill in this information to identif | | | | |
| Debtor 1 | Frank A. Crocitto | Jr. | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, | <u> </u> | Middle Name | Last Name | | |
| | tates Bankruptcy Court for the: | | ERSEY, TRENTON DIVISION |) N | |
| Officed 5 | itales Bankrupicy Court for the. | DISTRICT OF NEW SI | LIGHT, TREINTON DIVIOR | | |
| Case nu (if known) | mber | | | | Check if this is an |
| () | | | | " | amended filing |
| | | | | • | 5 |
| Officia | al Form 106H | | | | |
| Sche | dule H: Your Code | ebtors | | | 12/15 |
| | | | | | |
| re filing and num | rs are people or entities who are together, both are equally resp ber the entries in the boxes on a nber (if known). Answer every q | onsible for supplying c the left. Attach the Addi | orrect information. If more | space is needed, copy the A | dditional Page, fill it out, |
| 1. D | o you have any codebtors? (If y | ou are filing a joint case, | do not list either spouse as a | codebtor. | |
| ПΝ | 0 | | | | |
| Y | es | | | | |
| | fithin the last 8 years, have you fornia, Idaho, Louisiana, Nevada, | | | | d territories include Arizona, |
| ■ N | o. Go to line 3. | | | | |
| ΠY | es. Did your spouse, former spous | e, or legal equivalent live | with you at the time? | | |
| | | | | | |
| line 1061 | olumn 1, list all of your codebto 2 again as a codebtor only if the D), Schedule E/F (Official Form of Sumn 2. | at person is a guaranto | r or cosigner. Make sure y | ou have listed the creditor on | Schedule D (Official Form |
| | Column 1: Your codebtor Name, Number, Street, City, State and Zi | P Code | | Column 2: The creditor to w Check all schedules that app | • |
| | | | | | |
| 3.1 | Chrysler Capital | | | ☐ Schedule D, line | |
| | PO Box 961275 | _ | | ☐ Schedule E/F, line | |
| | Fort Worth, TX 76161-027 | 5 | | ■ Schedule G 2.1 | |
| | | | | Santander Consumer U | ISA |

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| | in this information to identify your countries to rank A. Cr | | | | | | | |
|--------------|--|----------------------------|------------------------------|--------------|-------|---------------------------------------|-------------------------------------|------------|
| | btor 2 Chrissy Cro | | | | | | | |
| | ited States Bankruptcy Court for the | : DISTRICT OF NEW J | IERSEY, TRENTON | I DIVISION | 1 | | | |
| | se number nown) | | - | | | | | chapter 13 |
| | fficial Form 106I | | | | | MM / DD/ | YYYY | |
| S | chedule I: Your Inc | ome | | | | | | 12/15 |
| spoi atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. (Tt 1: Describe Employment Fill in your employment | r spouse is not filing wit | h you, do not inclu | de inform | atior | n about your spo case number (if k | use. If more space is ne | eded, |
| | information. | | ■ Employed | | | ■ Emp | <u> </u> | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed ■ Not employed | | | _ ` | employed | |
| | employers. | Occupation | construction | | | exec a | ıss't | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | LaConti Maon | ry Inc | | Morga | n Stanley & Co | |
| | Occupation may include student of homemaker, if it applies. | or Employer's address | PO Box 831 Mantoloking, I | NJ 08738 | 3-08 | | York Plz Fl 5 ork, NY 10004-1901 | |
| | | How long employed th | nere? | | | | | |
| Par | rt 2: Give Details About Mor | nthly Income | | | | | | |
| unle | mate monthly income as of the dass you are separated. | | | | | | | |
| | u or your non-filing spouse have mor ce, attach a separate sheet to this for | | bine the information f | for all empl | oyers | s for that person or | n the lines below. If you no | eed more |
| | | | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, o | | | 2. | \$ | 6,855.33 | \$\$ | - |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$0.00 | _ |
| 4. | Calculate gross Income. Add lir | ne 2 + line 3. | | 4. | \$ | 6,855.33 | \$ 8,815.21 | |

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| Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy | | | Case r | number (if known) | | | |
|---|---------------|--|------------------|-------------------|----------|---------------|------------------------------|
| | | | | For | Debtor 1 | | Debtor 2 or illing spouse |
| | Cop | y line 4 here | 4. | \$ | 6,855.33 | \$ | 8,815.21 |
| 5. | List | all payroll deductions: | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 1,914.77 | \$ | 1,672.05 |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$_ | 0.00 | \$ | 0.00 |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | 969.67 |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | 689.82 |
| | 5e. | Insurance | 5e. | \$ | 45.41 | \$ | 265.74 |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | 0.00 |
| | 5g. | Union dues | 5g. | \$ | 619.67 | \$ | 0.00 |
| | 5h. | Other deductions. Specify: | 5h.+ | \$ | 0.00 | + \$ | 0.00 |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 2,579.85 | \$ | 3,597.28 |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 4,275.48 | \$ | 5,217.93 |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | 0.00 |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | 0.00 |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | · — | | · | |
| | | settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | 0.00 |
| | 8d. | Unemployment compensation | 8d. | \$_ | 0.00 | \$ | 0.00 |
| | 8e. 8f. | Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8e. 8f. | \$ \$ | 0.00 | \$ \$ | 0.00 |
| | 8g. | Pension or retirement income | — _{8g.} | \$_ | 0.00 | \$ | 0.00 |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | | + \$ | 0.00 |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | 0.00 |
| 10. | | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | 4 | + \$_ | 5,21 | 17.93 = \$ 9,493.41 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your de friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not availity: | ependen | | | | le J. 11. +\$ 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rest is that amount on the Summary of Schedules and Statistical Summary of Certain | | | • | | \$ 12. \\$ 9,493.41 |
| 13. | Do y ■ | ou expect an increase or decrease within the year after you file this form' No. Yes. Explain: | ? | | | | Combined monthly income |

| | | | | | | • | | |
|------|--------------------------------|--|--------------------|---|----------------------|------------|--------------------|---|
| Fill | in this informa | tion to identify yo | ur case: | | | | | |
| Deb | tor 1 | Frank A. Cro | citto,, Jr | • | | | neck if this is: | |
| Deb | tor 2 | Chrissy Cro | citto | | | | • | wing postpetition chapter 13 |
| | ouse, if filing) | Cillissy Cro | Jitto | | | | expenses as of the | |
| Unit | ed States Bankı | ruptcy Court for the: | DISTRI | CT OF NEW JERSEY, TR | ENTON | | MM / DD / YYYY | |
| 1 | e number nown) | | | | | | | |
| O | fficial Fo | orm 106J | | | | J | | |
| So | chedule | J: Your E | Expen | ses | | | | 12/1 |
| info | ormation. If m known). Answ | | eded, attac on. | f two married people are h another sheet to this fo | | | | supplying correct ur name and case numbe |
| 1. | Is this a joir | nt case? | | | | | | |
| | □ No. Go to | | | | | | | |
| | ■ Yes. Doe | s Debtor 2 live in | n a separa | te household? | | | | |
| | ■ N | - | t file Officia | al Form 106J-2, <i>Expenses</i> i | for Separate Househ | noldof Deb | tor 2. | |
| 2. | Do you hav | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □No |
| | dependents | names. | | | Daughter | | 5 | Yes |
| | | | | | Daughter | | 1 | □ No |
| | | | | | Daugnter | | | Yes □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 2 | De veur ev | | _ | | - | | | Yes |
| 3. | expenses o | penses include f people other th d your depender | ^{lan} ⊓ | No Yes | | | | |
| Par | | ate Your Ongoir | | | | | | |
| exp | | | | ptcy filing date unless yo is filed. If this is a supple | | | | |
| valı | | sistance and ha | | overnment assistance if y d it on Schedule I: Your I | | | Your exp | penses |
| 4. | | or home ownershid any rent for the | | es for your residence. In | clude first mortgage | 4. | \$ | 3,031.50 |
| | If not include | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | | erty, homeowner's, | or renter's | insurance | | 4a. 4b. | | 0.00 |
| | 4c. Home | maintenance, re | pair, and u | pkeep expenses | | 4c. | \$ | 120.00 |
| _ | | owner's associati | | | oo oo iitaa laasa | 4d. | · | 0.00 |
| 5. | Additional r | nortgage pavme | nts for vo | ur residence. such as hom | ne equity loans | 5. | ን | 0.00 |

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| ebtor 1 ebtor 2 | Crocitto,, Frank A. Jr. & Crocitto, Chrissy | Case num | ber (if known) | |
|--------------------|---|---------------|----------------|----------------------------|
| Utilit | ies: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 450.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 125.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 370.00 |
| 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| Food | and housekeeping supplies | | \$ | 1,200.00 |
| | Icare and children's education costs | 8. | \$ | 2,020.00 |
| Cloti | ning, laundry, and dry cleaning | 9. | \$ | 500.00 |
| | onal care products and services | 10. | \$ | 300.00 |
| Medi | cal and dental expenses | 11. | \$ | 100.00 |
| | sportation. Include gas, maintenance, bus or train fare. | | • | |
| | ot include car payments. | 12. | \$ | 600.00 |
| Ente | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 160.00 |
| Char | itable contributions and religious donations | 14. | \$ | 80.00 |
| Insu | rance. | | | |
| | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. | Life insurance | 15a. | · | 150.00 |
| | Health insurance | 15b. | · | 0.00 |
| | Vehicle insurance | 15c. | \$ | 200.00 |
| | Other insurance. Specify: | 15d. | \$ | 0.00 |
| | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | 4.0 | • | |
| Spec | | 16. | \$ | 0.00 |
| | Illment or lease payments: Car payments for Vehicle 1 | 17a. | \$ | 414.00 |
| | Car payments for Vehicle 2 | 17a. 17b. | · | 0.00 |
| | • • | 17b. | \$ | |
| | Other. Specify: student loans Other. Specify: | 17d. 17d. | · | 60.00 |
| | payments of alimony, maintenance, and support that you did not report | | Ψ | 0.00 |
| | icted from your pay on line 5, Schedule I, Your Income (Official Form 106) | | \$ | 0.00 |
| | r payments you make to support others who do not live with you. | ·/· | \$ | 0.00 |
| Spec | | 19. | | |
| | r real property expenses not included in lines 4 or 5 of this form or on Sc | hedule I: You | ır Income. | |
| 20a. | Mortgages on other property | 20a. | \$ | 0.00 |
| 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e. | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| Othe | r: Specify: pet food/vet | 21. | +\$ | 150.00 |
| | cuts | | +\$ | 120.00 |
| | | | | |
| | ulate your monthly expenses | | | 40.450.50 |
| | Add lines 4 through 21. | | \$ | 10,150.50 |
| | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J- | -2 | \$ | |
| 22c. | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 10,150.50 |
| Calc | ulate your monthly net income. | | | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 9,493.41 |
| | Copy your monthly expenses from line 22c above. | 23b. | | 10,150.50 |
| | | 230. | | 10,100.00 |
| 23c. | Subtract your monthly expenses from your monthly income. | | | |
| | The result is your monthly net income. | 23c. | \$ | -657.09 |
| For ex modif | ou expect an increase or decrease in your expenses within the year after cample, do you expect to finish paying for your car loan within the year or do you expect ication to the terms of your mortgage? | | | e or decrease because of a |
| ■ N | | | | |
| | es. Explain here: | | | |

| Fill in this | s information to identify yo | our case: | | | | |
|---------------------------------|--|------------------------|------------------|---------------------------|-----------------|---|
| Debtor 1 | Frank A. Crocitto | .lr | | | | |
| | First Name | Middle Name | Las | t Name | | |
| Debtor 2 | Chrissy Crocitto | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Las | t Name | | |
| United States | Bankruptcy Court for the: | DISTRICT OF NEW | / JERSEY, TRE | NTON DIVISION | | |
| Case number | | | | | | |
| (if known) | | | | | | Check if this is an amended filing |
| | | | | | | Ŭ |
| Official Fo | orm 106Dec | | | | | |
| Declar | ation About a | an Individu | al Debt | or's Schedเ | ıles | 12/15 |
| obtaining mor years, or both | this form whenever you fil ney or property by fraud ir n. 18 U.S.C. §§ 152, 1341, 19 | connection with a ba | | | | |
| 9 | Sign Below | | | | | |
| Did you | pay or agree to pay some | one who is NOT an at | torney to help y | ou fill out bankruptcy | forms? | |
| ■ No | | | | | | |
| ☐ Yes | s. Name of person | | | | , , | etition Preparer's Notice, ature (Official Form 119) |
| | enalty of perjury, I declare are true and correct. | that I have read the s | ummary and sc | hedules filed with this o | declaration and | |
| X /s/ F | rank A. Crocitto,, Jr. | | x | /s/ Chrissy Crocitto |) | |
| | nk A. Crocitto,, Jr. | | | Chrissy Crocitto | · | |
| | ature of Debtor 1 | | | Signature of Debtor 2 | | |

Date **January 9, 2019**

Date January 9, 2019

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| | | Docume | nt Page 51 of 75 | |
|---------------------|---------------------------|---------------------|------------------------|--------------------------------------|
| Fill in th | nis information to identi | fy your case: | | |
| Debtor 1 | Frank A. Crocitto | ,, Jr. | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Chrissy Crocitto | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEW JER | RSEY, TRENTON DIVISION | |
| Case number _ | | | | |
| (II KIIOWII) | | | | ☐ Check if this is an amended filing |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | r original forms, you must fill out a new Summary and check the box at the top of this page. | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|-----|---|---------|---|
| Pai | t 1: Summarize Your Assets | | r assets e of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$_ | 386,687.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$_ | 13,074.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$_ | 399,761.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | r liabilities unt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$_ | 352,774.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F | \$_ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &*chedule E/F | \$_ | 119,979.00 |
| | Your total liabilities | \$ | 472,753.00 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I | \$_ | 9,493.41 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$_ | 10,150.50 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. | er sche | edules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | rsonal, | family, or household |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box | and su | ubmit this form to the |

Official Form 106Sum

court with your other schedules.

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Debtor 1
Debtor 2
Crocitto,, Frank A. Jr. & Crocitto, Chrissy

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 13,033.88

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | aim |
|--|-----------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 2,061.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 2,061.00 |

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| | Fill in this | s information to identi | fy your case: | | | | |
|-------------------|---------------------|--|--|--------------|-------------------------------------|---|---|
| D- | | | | | | | |
| De | btor 1 | Frank A. Crocitt | O,, Jr. Middle Name | La | ast Name | | |
| De | btor 2 | Chrissy Crocitto | | | | | |
| (Sp | ouse if, filing) | First Name | Middle Name | La | ist Name | | |
| Un | ited States Ba | nkruptcy Court for the: | DISTRICT OF NEW JER | RSEY, TRE | ENTON DIVISION | | |
| | se number _ | | | | | - | Check if this is an amended filing |
| St Be a | as complete a | of Financial | | re filing to | gether, both are e | ankruptcy qually responsible for suppl additional pages, write your | |
| Pa | rt 1: Give D | Details About Your Ma | rital Status and Where You | Lived Be | fore | | |
| 1. | What is you | r current marital statu | s? | | | | |
| | ☐ Married ☐ Not mar | | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you | ı live now? | | |
| | ■ No □ Yes. Lis | t all of the places you liv | red in the last 3 years. Do not | include wh | nere you live now. | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 there | lived | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | | y property state or territory o, Texas, Washington and W | |
| Pa | | ake sure you fill out <i>Sch</i> e | edule H: Your Codebtors (Off | icial Form | 106H). | | |
| 4. | Fill in the tota | al amount of income you | nployment or from operatin u received from all jobs and a lave income that you receive t | all busines | ses, including part-t | | dar years? |
| | □ No ■ Yes. Fil | I in the details. | | | | | |
| | | | Debtor 1 | | | Debtor 2 | |
| | | | Sources of income Check all that apply. | | income e deductions and ions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | | \$0.00 | ■ Wages, commissions, bonuses, tips | \$4,266.00 |
| | | | ☐ Operating a business | | | ☐ Operating a business | |

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| Debtor 1 Debtor 2 | rocitto,, Fran | k A. Jr. & Cı | rocitto, Chrissy | | Case number (if known) | | |
|----------------------|---|---|--|--|------------------------------------|------------------|---|
| | | | | | | | |
| | | Sc | ebtor 1 ources of income neck all that apply. | Gross income (before deductions and exclusions) | Sources of inc | | Gross income (before deductions and exclusions) |
| For last cale | ndar year: o December 31, | 2018 1 | Wages, commissions, nuses, tips | \$62,078.0 | Wages, corbonuses, tips | nmissions, | \$96,521.00 |
| | | | Operating a business | | Operating a | ı business | |
| | ndar year before December 31, | 2017 \ | Wages, commissions, nuses, tips | \$78,748.0 | 00 ■ Wages, cor bonuses, tips | nmissions, | \$80,819.00 |
| | | | Operating a business | | ☐ Operating a | ı business | |
| □ No | source and the o | S | om each source separatel | y. Do not include income t | hat you listed in line 4 Debtor 2 | | |
| | | So | urces of income scribe below. | Gross income from each source (before deductions and exclusions) | Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| For last cale | ndar year: o December 31, | ur 2018) | employment | \$1,362.0 | 00 | | |
| | er Debtor 1's or Neither Debtor individual prim | Debtor 2's de or 1 nor Debto arily for a pers | bts primarily consumer or 2 has primarily consumonal, family, or household | debts? mer debts. Consumer de purpose." | | | as "incurred by an |
| | During the 90 No. | , | u filed for bankruptcy, did | you pay any creditor a tota | Il of \$6,425* or more? | | |
| | ☐ Yes L | ist below each reditor. Do not ayments to an | creditor to whom you paid include payments for don attorney for this bankrupto 1/01/19 and every 3 years a | nestic support obligations y case. | , such as child suppo | ort and alimony. | |
| ■ Yes | | | th have primarily consul ou filed for bankruptcy, did | | l of \$600 or more? | | |
| | ■ No. | So to line 7. | | | | | |
| | р | | creditor to whom you paid mestic support obligations case. | • | , | • | |
| Credito | r's Name and A | ddress | Dates of payme | nt Total amount | | Was this pa | yment for |

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| | Crocitto,, Frank A. Jr. & Crocitto | , Chrissy | Cas | e number (if known) | | |
|-----|---|---|--|---|------------------------------------|--|
| 7. | Within 1 year before you filed for bankruptcy Insiders include your relatives; any general partner which you are an officer, director, person in contribusiness you operate as a sole proprietor. 11 U.S. | ers; relatives of any gener rol, or owner of 20% or mo | ral partners; partnershi ore of their voting secu | ps of which you are rities; and any mana | a general parti aging agent, in | ner; corporations of cluding one for a |
| | No☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankruptcy insider? Include payments on debts guaranteed or cosign | | · | | ount of a deb | ot that benefited an |
| | No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name |
| Pa | t 4: Identify Legal Actions, Repossessions | , and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankruptcy List all such matters, including personal injury ca and contract disputes. | | | | | |
| | No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case |
| 10. | Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below. | | erty repossessed, fo | reclosed, garnish | ed, attached, | seized, or levied? |
| | ■ No. Go to line 11. Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | , | Date | | Value of the |
| | Oreutor Name and Address | Explain what happene | | Date | | property |
| 11. | Within 90 days before you filed for bankrupte accounts or refuse to make a payment becau | | cluding a bank or fina | nncial institution, s | et off any am | nounts from your |
| | Yes. Fill in the details. | | | | | |
| | Creditor Name and Address | Describe the action th | e creditor took | Date a | action was | Amount |
| 12. | Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or and | | erty in the possessio | | | t of creditors, a |
| | No | | | | | |
| | ☐ Yes | | | | | |
| Pa | t 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrupto | y, did you give any gift | ts with a total value o | of more than \$600 | per person? | |
| | ■ No | ,, | | | | |
| | ☐ Yes. Fill in the details for each gift. | | | | | |
| | Gifts with a total value of more than \$600 person | Pr Describe the gifts | S | Dates the gi | you gave fts | Value |
| | Person to Whom You Gave the Gift and | | | | | |

Debtor 1

Case 19-13559-MBK Doc 1 Filed 02/21/19 Entered 02/21/19 12:26:08 Page 56 of 75 Document Debtor 1 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known) Debtor 2 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of **Address** transferred transfer was payment Email or website address made Person Who Made the Payment, if Not You Kevin B. Zazzera, Esq. legal fee \$3,250.00 182 Rose Ave Ste 3 Staten Island, NY 10306-2900 credit counseling \$100.00 greenpath 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of transferred transfer was Address payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details. П

Person Who Received Transfer Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Case 19-13559-MBK Doc 1 Filed 02/21/19 Entered 02/21/19 12:26:08 Document Page 57 of 75 Debtor 1 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known) Debtor 2 beneficiary? (These are often called asset-protection devices.) Nο Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. п Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance before instrument closed, sold, closing or transfer Address (Number, Street, City, State and ZIP account number Code) moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else

- Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.
 - No
 - ☐ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 19-13559-MBK Doc 1 Filed 02/21/19 Entered 02/21/19 12:26:08 Page 58 of 75 Document Debtor 1 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known) Debtor 2 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο П Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No П Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Chrissy Crocitto /s/ Frank A. Crocitto,, Jr. Frank A. Crocitto,, Jr. **Chrissy Crocitto** Signature of Debtor 1 Signature of Debtor 2

Official Form 107

Date

January 9, 2019

January 9, 2019

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| Debtor 1 Debtor 2 | Crocitto,, Fran | nk A. Jr. & Crocitto, Chrissy | Case number (if known) | |
|-----------------------|--------------------|---|---|--|
| Did you at ■ No □ Yes | tach additional pa | iges to Your Statement of Financial Affairs for In | ndividuals Filing for Bankruptcy (Official Form 107)? | |
| Did you pa | ay or agree to pay | someone who is not an attorney to help you fill | out bankruptcy forms? | |
| ☐ Yes. Na | ame of Person | . Attach the Bankruptcy Petition Preparer's Notic | e, Declaration, and Signature (Official Form 119). | |

| Fill in this info | ormation to identify your case: | | Chack o | ne box only as d | irected | in this form and | in Form |
|---|---|--|---------------|---|--------------------|--|--------------------------------|
| Debtor 1 | Frank A. Crocitto,, Jr. | | 122A-1S | | | in this form and | |
| Debtor 2 | Chrissy Crocitto | | □ 1. · | There is no pres | umptior | n of abuse | |
| (Spouse, if filing) United States | District of New Je Bankruptcy Court for the: Division | rsey, Trenton | 2 . | The calculation t applies will be n Calculation (Offi | nade ur | nder <i>Chapter 7 M</i> | • |
| Case number | | | □ 3. | The Means Test military service b | does no | ot apply now bec | ause of qualified |
| | | | □ CI | neck if this is a | ın ame | ended filina | |
| Official I | Form 122A - 1 | | | | | J | |
| | r 7 Statement of Your Cui | rent Monthly In | com | е | | | 12/1 |
| a separate she number (if kno military service Part 1: | e and accurate as possible. If two married people a et to this form. Include the line number to which the wn). If you believe that you are exempted from a p e, complete and file Statement of Exemption from Calculate Your Current Monthly Income | ne additional information applie resumption of abuse because of Presumption of Abuse Under § | s. On the | e top of any addit ot have primarily | ional pa consum | iges, write your n ner debts or beca | ame and case use of qualifying |
| | your marital and filing status? Check one on | ly. | | | | | |
| _ | married. Fill out Column A, lines 2-11. | | | | | | |
| _ | ried and your spouse is filing with you. Fill ou | | s 2-11. | | | | |
| ⊔ Marr | ied and your spouse is NOT filing with you. | You and your spouse are: | | | | | |
| _ | ving in the same household and are not lega | | | • | | | |
| p | ving separately or are legally separated. Fill of enalty of perjury that you and your spouse are legorate for reasons that do not include evading the N | ally separated under nonbank | ruptcy la | w that applies or | | . , | |
| 101(10A). F 6 months, a | verage monthly income that you received from all or example, if you are filing on September 15, the 6-m dd the income for all 6 months and divide the total by ne rental property, put the income from that property in | onth period would be March 1 th 6. Fill in the result. Do not include | rough Au | gust 31. If the amo me amount more t | unt of yo | our monthly income e. For example, if | e varied during the |
| | | | Colu Debt | mn A or 1 | Debt | mn B or 2 or filing spouse | |
| | oss wages, salary, tips, bonuses, overtime, a leductions). | and commissions (before all | \$ | 4,218.67 | \$ | 8,815.21 | |
| Column | y and maintenance payments. Do not include B is filled in. | | \$ | 0.00 | \$ | 0.00 | |
| of you of from an roomma | unts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household, ites. Include regular contributions from a spous nclude payments you listed on line 3 | Include regular contributions | _1 | 0.00 | \$ | 0.00 | |
| 5. Net inco | ome from operating a business, profession, | | | | | | |
| | | Debtor 1 | | | | | |
| | eceipts (before all deductions) | \$ 0.00 | | | | | |
| • | y and necessary operating expenses | -\$ 0.00 Conv boro | - 0 | 0.00 | ¢ | 0.00 | |
| | nthly income from a business, profession, or far | m \$0.00 Copy here | -> φ <u> </u> | 0.00 | \$ | 0.00 | |
| 6. Net inco | ome from rental and other real property | Debtor 1 | | | | | |
| | and to the term all de beet | \$ 0.00 | | | | | |
| | eceipts (before all deductions) | -\$ 0.00 -\$ | | | | | |
| • | and necessary operating expenses | 0.00 | -~ ¢ | 0.00 | \$ | 0.00 | |
| ivet mor | othly income from rental or other real property | \$ U.UU Copy nere | - ψ | 0.00 | Ψ | 0.00 | |

0.00

0.00

7. Interest, dividends, and royalties

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| | | | | Column A Debtor 1 | | Column B Debtor 2 o non-filing | | |
|------|--|----------------------------------|------------|--------------------------|---------------|--------------------------------|--|----------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | 0.00 | |
| | Do not enter the amount if you contend that the amount received Social Security Act. Instead, list it here: | d was a benefi | t under tl | ne | | | | |
| | For you\$ | | 0.00 | | | | | |
| | For your spouse\$ | | 0.00 | | | | | |
| | Pension or retirement income. Do not include any amount recunder the Social Security Act. | | | \$ | 0.00 | \$ | 0.00 | , |
| 10. | Income from all other sources not listed above. Specify the not include any benefits received under the Social Security Act of a victim of a war crime, a crime against humanity, or international if necessary, list other sources on a separate page and put the total content of the sources. | or payments re al or domestic | eceived a | IS | 0.00 | \$ | 0.00 | |
| | | | | \$ | 0.00 | \$ | 0.00 | |
| | Total amounts from separate pages, if any. | | _ | + \$ | 0.00 | \$ | 0.00 | |
| | | | | · · · | 1 [| | 7 [| ' |
| 11. | Calculate your total current monthly income. Add lines 2 the each column. Then add the total for Column A to the total for | | \$_ | 4,218.67 | + \$ _ | 8,815.21 |] <u>[</u> | 3,033.88 |
| Part | 2: Determine Whether the Means Test Applies to You | | | | | | | |
| 12. | Calculate your current monthly income for the year. Follow | these steps: | | | | | | |
| | 12a. Copy your total current monthly income from line 11 | | | Сору | y line 11 | here=> | \$ <u> 1</u> | 3,033.88 |
| | Multiply by 12 (the number of months in a year) | | | | | | x 1 | 2 |
| | 12b. The result is your annual income for this part of the form | | | | | 121 | o. \$15 | 6,406.56 |
| 13. | Calculate the median family income that applies to you. For | ollow these ste | ps: | | | | | |
| | Fill in the state in which you live. | NJ | | | | | | |
| | Fill in the number of people in your household. | 4 | | | | | | |
| | Fill in the median family income for your state and size of hous To find a list of applicable median income amounts, go online form. This list may also be available at the bankruptcy clets off | using the link | | d in the separat | | | \$12 | 2,474.00 |
| 14. | How do the lines compare? | | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. On the to Go to Part 3. | op of page 1, | check bo | ox 1T,here is no p | oresumpt | ion of abuse. | | |
| | 14b. Line 12b is more than line 13. On the top of page Go to Part 3 and fill out Form 122A-2. | 1, check box | 2T,he pre | esumption of ab | use is de | termined by F | orm 122A- | 2. |
| Part | 3: Sign Below | | | | | | | |
| | By signing here, I declare under penalty of perjury that the | information or | this sta | tement and in a | ny attachi | ments is true a | nd correct | |
| | X /s/ Frank A. Crocitto,, Jr. | Х | /s/ Ch | rissy Crocit | to | | | |
| | Frank A. Crocitto,, Jr. | | | sy Crocitto | | | | |
| | Signature of Debtor 1 | Dete | • | ure of Debtor 2 | | | | |
| | Date January 9, 2019 MM / DD / YYYY | Date | | ary 9, 2019 DD / YYYY | | | | |
| | If you checked line 14a, do NOT fill out or file Form 122A | ·-2. | | • | | | | |
| | If you checked line 14b, fill out Form 122A-2 and file it wit | th this form. | | | | | | |

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| Fill in this information to identify your case: | | | | | |
|---|--------------------------|---|--|--|--|
| Debtor 1 | Frank A. Crocitto,, J | lr. | | | |
| Debtor 2 (Spouse, if filing | Chrissy Crocitto | | | | |
| United States Ba | ankruptcy Court for the: | District of New Jersey, Trenton Division | | | |
| Case number (if known) | | | | | |

| Check the appropriate box as directed in lines 40 or 42: |
|---|
| According to the calculations required by this Statement: |
| ■ 1. There is no presumption of abuse. |
| ☐ 2. There is a presumption of abuse. |
| |

☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

| Par | t 1: Determine Your Adjusted Income | | | | | | |
|-----|---|--------------------------|--|---------------|-------|-----------|-------------|
| 1. | Copy your total current monthly income. | Copy line 11 from Office | cial Form 122A | -1 here=> | . \$_ | 1 | 3,033.88 |
| 2. | Did you fill out Column B in Part 1 of Form 122A-1? ☐ No. Fill in \$0 for the total on line 3. ☐ Yes. Is your spouse Filing with you? ☐ No. Go to line 3. ☐ Yes. Fill in \$0 the total on line 3. | | | | | | |
| 3. | Adjust your current monthly income by subtracting any household expenses of you or your dependents. Follow the On line 11, Column B of Form 122A-1, was any amount of the you or your dependents? No. Fill in 0 for the total on line 3. | nese steps: | | | | nousehold | expenses of |
| | State each purpose for which the income was used For example, the income is used to pay your spouse's to support other than you or your dependents. | ax debt or to s \$ | in the amount subtracting fr ur spouse's inc | om | | | |
| 4. | Adjust your current monthly income. Subtract line 3 from | | 0.00 | Copy total he | ere=> | | 0.00 |

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy

Case number (if known)

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4 Living 0 Housing

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1.694.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$
- 7b. Number of people who are under 65 X
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 208.00 Copy here=> \$ 208.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 114
- 7e. Number of people who are 65 or older X ______0
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00
- 7g. Total. Add line 7c and line 7f \$ 208.00 Copy total here=> \$ 208.00

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| Loc | al Sta | andards You must use the IRS Local Standards to ans | wer the c | questions in line | es 8-15. | | |
|------------|--|---|----------------|-------------------|----------------|------------------|--------------------------------|
| | Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: | | | | | | |
| ■ F | lousi | ng and utilities - Insurance and operating expenses | | | | | |
| = + | lousi | ng and utilities - Mortgage or rent expenses | | | | | |
| Toa | answ | er the questions in lines 8-9, use the U.S. Trustee Pro | gram cha | ırt. | | | |
| To f | ind th | e chart, go online using the link specified in the separate | instructio | ons for this form | ۱. | | |
| This | char | t may also be available at the bankruptcy clerk's office. | | | | | |
| 8. | | sing and utilities - Insurance and operating expenses dollar amount listed for your county for insurance and opera | | | | | fill in \$ |
| 9. | Hou | sing and utilities - Mortgage or rent expenses: | | | | | |
| | 9a. | Using the number of people you entered in line 5, fill in t listed for your county for mortgage or rent expenses | | | | \$ 2,5 | 667.00 |
| | 9b. | Total average monthly payment for all mortgages and other | er debts s | ecured by your | home. | | |
| | | To calculate the total average monthly payment, add all contractually due to each secured creditor in the 60 month bankruptcy. Then divide by 60. | | | | | |
| | | Name of the creditor | Average paymer | e monthly nt | | | |
| | | Gateway Mortgage Grp | _ \$ | 3,026.00 | | | |
| | | | | | ٦ | | |
| | | Total average monthly payment | \$ | 3,026.00 | Copy here=> | ¢ 3 | Repeat this amount on line 333 |
| | | Total average monthly payment | φ | | Here=> | -φ , | line 33a. |
| | 9c. | Net mortgage or rent expense. | | | | | ٦ |
| | | Subtract line 9b (total average monthly paymen) from lin rent expense). If this amount is less than \$0, enter \$0 | | | \$ | 0.00 | Copy here=> \$0.00 |
| 10. | | ou claim that the U.S. Trustee Program's division of th cts the calculation of your monthly expenses, fill in ar | | | | is incorrect an | d \$ 0.00 |
| | Exp | olain why: | | | | | |
| 11. | Loc | al transportation expenses: Check the number of vehicle | es for whi | ch you claim an | ownership (| or operating exp | ense. |
| | | . Go to line 14. | | | | | |
| | □ 1 | . Go to line 12. | | | | | |
| | 2 2 | or more. Go to line 12. | | | | | |
| 12. | | icle operation expense: Using the IRS Local Standards enses, fill in the Operating Costs that apply for your Census | | | | | operating \$ 608.00 |

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Debtor 1 Debtor 2

Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| | two verile | claim the expense if you cles. | do not make any loan or lease | | s on the vehicle | | , you may not c | nse for each vehicle laim the expense fo | |
|------------|-------------------------------------|--|--|---------------------|--------------------|--------------------------|-----------------|--|--------|
| Ve | hicle 1 | Describe Vehicle 1: | " Secured property | | | | | | |
| 13a | . Ownersh | nip or leasing costs usin | g IRS Local Standard | | | \$ | 497.00 | | |
| 13b | ŭ | monthly payment for all clude costs for leased v | debts secured by Vehicle 1. | | | | | | |
| | contractu | | ly payment here and on line of discreditor in the 60 months aft | | | | | | |
| | Nan | ne of each creditor for | Vehicle 1 | Average paymer | e monthly nt | | | | |
| | Ch | rysler Capita | | \$ | 414.00 | | | | |
| | Pei | rformance Finance | | \$ | 166.90 | | | | |
| | | Total <i>i</i> | Average Monthly Payment | \$ | 580.90 | Copy here => | -\$580 | Repeat this amount on line 33b. | |
| 13c | | cle 1 ownership or lease line 13b from line 13a. | expense if this amount is less than \$0 | , enter \$0. | | \$ | 0.00 | Copy net Vehicle 1 expense here => \$ | 0.00 |
| Ve | hicle 2 | Describe Vehicle 2: | | | | | | J | |
| | | | g IRS Local Standard | | | \$ | 497.00 | | |
| 13d | . Ownersh | nip or leasing costs usin | g IRS Local Standarddebts secured by Vehicle 2. D | | | \$ | 497.00 | | |
| 13d | . Ownersh . Average leased ve | nip or leasing costs usin | debts secured by Vehicle 2. D | o not inclu | de costs for | \$ | 497.00 | | |
| 13d | . Ownersh . Average leased ve | nip or leasing costs usin monthly payment for all shicles. | debts secured by Vehicle 2. D | o not inclu | de costs for | \$ | 497.00 | | |
| 13d | . Ownersh . Average leased ve | nip or leasing costs usin monthly payment for all shicles. ne of each creditor for DNE- | debts secured by Vehicle 2. D | Averag | de costs for | Copy here => -\$ _ | 497.00 | Repeat this amount on line 33c. | |
| 13d | . Ownersh . Average leased ve | mip or leasing costs using monthly payment for all shicles. Total of the company of the control | debts secured by Vehicle 2. Developed Provided P | Average paymer \$\$ | e monthly | Copy here => -\$ _ | | amount on line | 497.00 |
| 13d 13e | Net Vehic Subtract | monthly payment for all chicles. ne of each creditor for all chicles. Total of the company of lease line 13e from line 13d. | Average Monthly Payment | Average paymer \$ | e monthly 1. 0.00 | Copy here => -\$ _ | 497.00 | amount on line 33c. Copy net Vehicle 2 expense here => \$ | 497.00 |

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Debtor 1 Debtor 2

Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| Oth | er Necessary Expenses | In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. | | |
|-----|--|--|------|-----------|
| 16. | self-employment taxes, Soc your pay for these taxes. Ho | mount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 and the total monthly amount that is withheld to pay for taxes. | | |
| | Do not include real estate, s | ales, or use taxes. | \$_ | 2,850.36 |
| 17. | Involuntary deductions: Tunion dues, and uniform co | The total monthly payroll deductions that your job requires, such as retirement contributions, ssts. | | |
| | Do not include amounts that | t are not required by your job, such as voluntary 401(k) contributions or payroll savings. | \$_ | 2,040.82 |
| 18. | together, include payments | nonthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term. | \$_ | 150.00 |
| 19. | Court-ordered payments: agency, such as spousal or | The total monthly amount that you pay as required by the order of a court or administrative child support payments. | | |
| | Do not include payments o | n past due obligations for spousal or child support. You will list these obligations in line 35. | \$_ | 0.00 |
| 20. | Education: The total month as a condition for your jo | nly amount that you pay for education that is either required: b, or | | |
| | for your physically or me | ntally challenged dependent child if no public education is available for similar services. | \$_ | 0.00 |
| 21. | Childcare: The total month | ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. | | |
| | Do not include payments for | r any elementary or secondary school education. | \$_ | 2,020.00 |
| 22. | required for the health and | penses, excluding insurance costs: The monthly amount that you pay for health care that is welfare of you or your dependents and that is not reimbursed by insurance or paid by a health only the amount that is more than the total entered in line 7. | | |
| | Payments for health insurar | nce or health savings accounts should be listed only in line 25. | \$_ | 0.00 |
| 23. | you and your dependents, s | elephone services: The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it imployer. | | |
| | | or basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted. | +\$_ | 0.00 |
| 24. | Add all of the expenses a Add lines 6 through 23. | llowed under the IRS expense allowances. | \$ | 10,835.18 |

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| Add | ditional | Expense Deductions These are additiona | I deductions allowed by the N | Means Test. | | |
|-----|--|---|---|--|-----|--------|
| | | Note: Do not include | e any expense allowances lis | ted in lines 6-24. | | |
| 25. | Health insura depend | | | | | |
| | Health | insurance | \$293.69 | | | |
| | Disabi | lity insurance | \$0.00 | | | |
| | Health | savings account | + \$ | | | |
| | Total | | \$ 293.69 | Copy total here=> | \$ | 293.69 |
| | Do you | actually spend this total amount? | | | | |
| | | No. How much do you actually spend? | o | | | |
| | | Yes | \$ | | | |
| 26. | continution housel | nued contributions to the care of household ue to pay for the reasonable and necessary care hold or member of your immediate family who is outions to an account of a qualified ABLE program | and support of an elderly, chunable to pay for such exper | nronically ill, or disabled member of your | \$ | 0.00 |
| 27. | 7. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. | | | | | |
| | By law, the court must keep the nature of these expenses confidential. | | | | | 0.00 |
| 28. | Additi | onal home energy costs. Your home energy c | osts are included in your ins | urance and operating expenses on line 8. | | |
| | | pelieve that you have home energy costs that are I in the excess amount of home energy costs. | e more than the home energy | costs included in expenses on line 8, | | |
| | | ust give your case trustee documentation of you d is reasonable and necessary. | r actual expenses, and you n | nust show that the additional amount | \$ | 0.00 |
| 29. | \$160.4 | ation expenses for dependent children who a 12* per child) that you pay for your dependent ch 12 ntary or secondary school. | | | | |
| | | ust give your case trustee documentation of you able and necessary and not already accounted to | | nust explain why the amount claimed is | | |
| | * Subj | ect to adjustment on 4/01/19, and every 3 years | after that for cases begun or | n or after the date of adjustment. | \$ | 0.00 |
| 30. | than th | onal food and clothing expense. The monthly ne combined food and clothing allowances in the od and clothing allowances in the IRS National | ne IRS National Standards. | | | |
| | | d a chart showing the maximum additional allowarm. This chart may also be available at the bankr | | specified in the separate instructions for | | |
| | You m | ust show that the additional amount claimed is re | easonable and necessary. | | \$ | 0.00 |
| 31. | | nuing charitable contributions. The amount the nents to a religious or charitable organization. | | bute in the form of cash or financial | +\$ | 100.00 |
| 32. | | II of the additional expense deductions. nes 25 through 31. | | | \$ | 393.69 |

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Debtor 1 Debtor 2 Crocitto,, Frank A. Jr. & Crocitto, Chrissy

| Deduct | tions for Debt Payment | | | | | |
|--------|---|---|-----------|--|-----------------|-------------------------|
| | debts that are secured by an intered other secured debt, fill in lines 33a | st in property that you own, including home through 33e. | mortgag | es, vehicle loans | s, | |
| | calculate the total average monthly payl 60 months after you file for bankruptcy | ment, add all amounts that are contractually due . Then divide by 60. | o each se | ecured creditor in | | |
| | Mortgages on your home: | | | | | verage monthly yment |
| 33a. | Copy line 9b here | | | = | > \$ | 3,026.00 |
| | Loans on your first two vehicles: | | | | | |
| 33b. | Copy line 13b here | | | = | > \$ | 580.90 |
| 33c. | | | | | > \$ | 0.00 |
| 33d. | List other secured debts: | | | | | |
| Name o | f each creditor for other secured debt | Identify property that secures the debt | | Does payment include taxes or insurance? | or | |
| | | | | □ No | | |
| _ | NONE- | | | ☐ Yes | \$ | |
| | | | | □ No | | |
| | | | | ☐ Yes | \$ | |
| _ | | | | | Ψ. | |
| | | | | □ No | | |
| | | | | ☐ Yes | +\$ | |
| | | | | |]_ | |
| | | | | 2 606 00 | Copy total | |
| 33e. 1 | Fotal average monthly payment. Add li | nes 33a through 33d | \$ | 3,606.90 | here=> | \$ 3,606.90 |
| | | secured by your primary residence, a vehicl port or the support of your dependents? | e, or | | J | |
| | No. Go to line 35. | | | | | |
| | | at pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividow. | | | | |
| Name | of the creditor | Identify property that secures the debt | | Total cure amount | | Monthly cure amount |
| -NON | NE- | | \$ | ÷ | 60 = \$ | |
| | | | | | 1 | |
| | | | | | Сору | |
| | | Tota | al \$ | 0.00 | total here=> | \$ 0.00 |
| | | | | |] | |
| | | s a priority tax, child support, or alimony - th ir bankruptcy case? 11 U.S.C. § 507. | at | | | |
| _ | No. Go to line 36. | | | | | |
| | | these priority claims. Do not include current or outlisted in line 19. | ongoing | | | |
| | Total amount of all past-due p | | \$ | 0.00 | ÷ 60 = | \$0.00 |

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Debtor 1 Crocitto,, Frank A. Jr. & Crocitto, Chrissy Case number (if known) Debtor 2 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link foBankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. No. Go to line 37 ☐ Yes. Fill in the following information. Projected monthly plan payment if you were filing under Chapter 13 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense if you were filing under Chapter 13 3.606.90 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 10.835.18 expense allowances Copy line 32, All of the additional expense deductions 393.69 Copy line 37, All of the deductions for debt payment 3,606.90 14.835.77 14.835.77 Total deductions Copy total here=> Part 3: **Determine Whether There is a Presumption of Abuse** 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 13,033.88 39b. Copy line 38, Total deductions 14.835.77 - \$ 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Copy 0.00 0.00 Subtract line 39b from line 39a here=>\$ x 60 For the next 60 months (5 years) Сору 0.00 0.00 39d. Total. Multiply line 39c by 60 \$ here=> 40. Find out whether there is a presumption of abuse. Check the box that applies: ■ The line 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. ☐ The line 39d is more than \$12,850*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5. ☐ The line 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41. *Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

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| Debtor 1 Debtor 2 | Cro | citto,, Frank A. Jr. & Crocitto, Chrissy | | Case nu | mber (<i>if known</i>) | | |
|----------------------|-------------------------------|---|--------------------|---------------------|-----------------------------------|----------------|------------|
| 41. | 41a. | Fill in the amount of your total nonpriority unsecured dek Summary of Your Assets and Liabilities and Certain Statistical Schedules (Official Form 106Sum), you may refer to line 3b of | I Information | <i>A</i> 11a. \$ | x .25 | - - | |
| | 41b. | 25% or your total nonpriority unsecured debt. 11 U.S.C. § Multiply line 41a by 0.25 | | l | | Copy here=> | \$ |
| of | your | ne whether the income you have left over after subtracting unsecured, nonpriority debt. le box that applies: | all allowed dedu | uction | s is enough to pa | ay 25% | |
| | | 39d is less than line 41b. On the top of page 1 of this form, cho Part 5. | eck box 1, There | is no į | presumption of ab | use. | |
| | | 39d is equal to or more than line 41b. On the top of page 1 o e. You may fill out Part 4 if you claim special circumstances. The | | box 2 | , There is a presu | mption of | |
| Part 4: | Gi | ve Details About Special Circumstances | | | | | |
| ■ N | No. Go Yes. Fi Yo Yo | e alternative? 11 U.S.C. § 707(b)(2)(B). to to Part 5. If in the following information. All figures should reflect your average may include expenses you listed in line 25. The interpolation of the special circumstances are excessary and reasonable. You must also give your case trustee dijustments. | that make the exp | enses | s or income adjustr | ments | tem. |
| | C | Give a detailed explanation of the special circumstances | | | ge monthly expe ome adjustment | nse | |
| | _ | | | \$_ | | | |
| | _ | | | \$ | | | |
| | _ | | | \$_ | | | |
| | _ | | | \$ | | | |
| Part 5: | Sid | ın Below | | | | | |
| r art or | , | gning here, I declare under penalty of perjury that the information | n on this statemer | nt and | in any attachments | s is true and | I correct. |
| | X /s | / Frank A. Crocitto,, Jr. | X /s/ Chriss | v Cro | ocitto | | |
| | F | rank A. Crocitto,, Jr. gnature of Debtor 1 | Chrissy C | rocit | to | | |
| Da | ate J a | v . | date January 9 | 9, 20 ⁻ | 19 | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-13559-MBK Doc 1 Filed 02/21/19 Entered 02/21/19 12:26:08 Desc Main

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey, Trenton Division

| In re | Crocitto,, Frank A. Jr. & Crocitto, Chrissy | | Case No. | | |
|--------------|--|--|------------------------|----------------------------|-------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPE | ENSATION OF ATTO | ORNEY FOR I | DEBTOR | |
| c | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation | ng of the petition in bankruptc | y, or agreed to be pai | d to me, for services rend | lered or to |
| | For legal services, I have agreed to accept | | \$ | 3,250.00 | |
| | Prior to the filing of this statement I have received. | | \$ | 3,250.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. T | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. Т | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. I | I have not agreed to share the above-disclosed comp firm. | pensation with any other perso | on unless they are me | nbers and associates of n | ny law |
| [| ☐ I have agreed to share the above-disclosed compension copy of the agreement, together with a list of the national control of the agreement. | | | | firm. A |
| 5. I | in return for the above-disclosed fee, I have agreed to re | ender legal service for all aspe | ects of the bankruptcy | case, including: | |
| b c | Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, stat Representation of the debtor at the meeting of credite [Other provisions as needed] | ement of affairs and plan which | ch may be required; | | ptcy; |
| 6. E | By agreement with the debtor(s), the above-disclosed fe | e does not include the following | ng service: | | |
| | | CERTIFICATION | | | |
| I this ba | certify that the foregoing is a complete statement of an ankruptcy proceeding. | y agreement or arrangement f | or payment to me for | representation of the deb | otor(s) in |
| Ja | anuary 9, 2019 | /s/ Kevin Zazzera | a | | _ |
| Date | | Kevin Zazzera Signature of Attorn | av. | | |
| | | Kevin B. Zazzera | | | |
| | | 182 Rose Ave St Staten Island, N | | | |
| | | kzazz007@yaho | o.com | | - |